

**CALIFORNIA DEPARTMENT OF EDUCATION
SPECIAL EDUCATION DIVISION**

RESPONSE TO:

THE U.S. DEPARTMENT OF EDUCATION

**QUESTIONS PERTAINING TO
COMING INTO COMPLIANCE WITH
IDEA, PART B**

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December 21, 1999

Judith Heumann
U.S. Department of Education
Office of Special Education and Rehabilitative Services
400 Maryland Avenue, S.W.
Washington, D.C. 20202-2500

Dear Judy:

I am writing to address the concerns you raise in your December 3, 1999 letter. Although the tone of your letter seemed harsh, I remain convinced that we can resolve this matter through the continued good faith cooperation that has been so much in evidence through this process. In this regard, I was gratified to see you acknowledge that Superintendent Eastin and I share your commitment to improving results for children with disabilities in California. As I see it, once we agree that we share this commitment to assuring that all eligible children in California receive FAPE, the details of information gathering will be relatively easy to resolve. Additionally, I am convinced that there has been a serious misunderstanding about California's compliance monitoring system and pilot focused monitoring system, which is moving us to a more sophisticated results-oriented design.

As you know, in reaching our mutual goal of assuring that all eligible children receive a FAPE, the U.S. Department of Education, CDE and LEA's have respective and differing responsibilities. I sincerely believe that a clarification of the question regarding how OSEP views SEA responsibilities, specifically, how OSEP views SEA responsibility as separate and distinct from LEA responsibility, will go far to helping us to understand what OSEP expects of us. I am sure that that would allow us to resolve our differences amicably. Please do not misinterpret our posing this question as resistance to OSEP oversight. The issue of CDE compliance is a legitimate one for the Department of Education review and we raise no issue with the exercise of that oversight. Rather, we are trying to ascertain the standards OSEP is using to exercise that oversight. It was for this reason that we requested at our September 21, 1999 meeting a statement from OSEP as to how OSEP would determine CDE compliant with its general supervisory responsibilities.

Per your request, we have prepared an individual response to each of your 79 questions rather than a clustering our responses around common issues. In your December 3, 1999 letter you requested part of the response on December 17 and the remaining responses by December 31. While this has placed an extraordinary burden on our staff, we are pleased to forward the responses to all questions earlier than anticipated. We sincerely hope this will be helpful in your understanding of our progress and diligence.

We understand that Secretary Riley has taken a personal interest in this matter. Accordingly, we would hope that he would be informed of the volume of information that we are providing herewith, as well as our concerns over the clarification of our SEA responsibility.

We are pleased to include for your review with this letter the requested information and responses to all 79 questions from your December 3, 1999 letter. Should you need further clarification, please contact CDE's Director of Special Education, Alice Parker, at (916) 445-4602.

Sincerely,

LESLIE FAUSSET
Chief Deputy Superintendent
Policy and Programs

LF:ap

Enclosures

cc: Richard W. Riley, Secretary of Education,
 U.S. Department of Education
 Gary Hart, Secretary of Education,
 Office of the Secretary for Education
 Delaine Eastin, State Superintendent of Public Instruction
 California Department of Education
 Loni Hancock, Region IX, U.S. Department of Education

The U.S. Department of Education's questions regarding the CDE proposal to come into compliance with Part B of the Individuals with Disabilities Education Act (IDEA) within one year.

I. EFFECTIVE METHODS FOR IDENTIFYING NONCOMPLIANCE

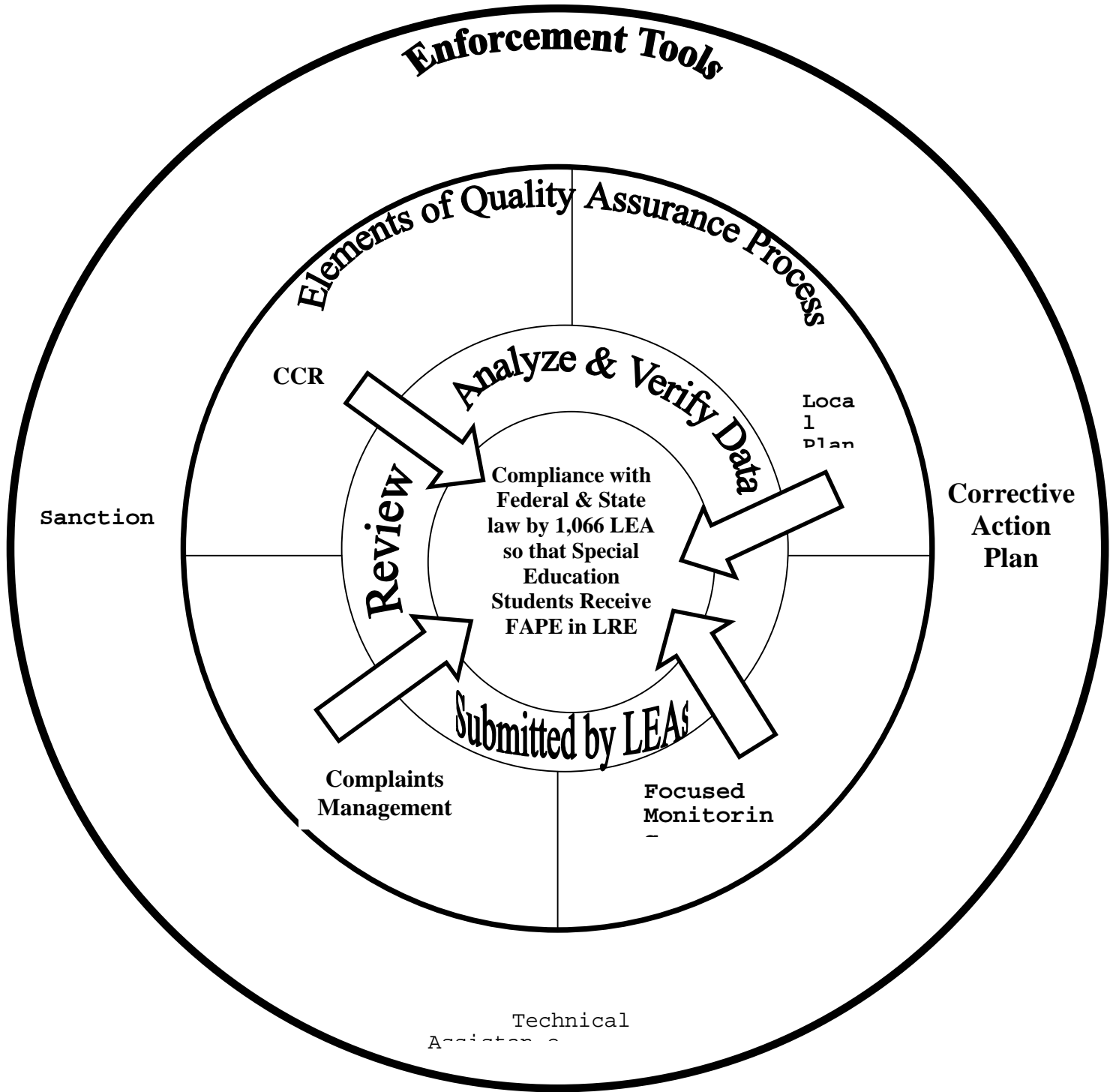
Over-arching Question:

How and when will the California Department of Education (CDE) implement its proposed focused monitoring system and other procedures to ensure the accurate, comprehensive, and timely identification of noncompliance in districts throughout the state?

Answer: As a State Education Agency (SEA) we recognize our responsibility to establish and maintain a system of statewide LEA compliance. Both federal and state law require us to both monitor the activities of our LEAs in providing eligible children with Free Appropriate Public Education (FAPE), and also to take appropriate actions when LEAs are failing to carry out their responsibilities.

Focused monitoring is an essential element of our overall supervision and monitoring program for the 1,066 Local Educational Agencies (LEAs) in California. However, it is only one element in a series of closely linked and coordinated activities. Without a thorough consideration of all these activities, an understanding of the Overall Supervision and Monitoring (OS&M) is not possible. The following chart depicts the key elements of our system of OS&M:

California Department of Education
Special Education Division
Overall Supervision and Monitoring



I. OVERVIEW

The core of CDE’s general supervision of federal and state compliance by LEAs is to ensure compliance with federal and state laws by 1,066 local education agencies so that all children with disabilities receive a free appropriate public education in the least restrictive environment.

A. Review, Analysis and Verification of Information

The California Department of Education requires LEAs to submit a wide variety of information on an annual basis. This information addresses their policies and procedures, their budget and services, an assessment of their compliance with federal and state laws (250 districts each year) and information about the students, programs, and outcomes. The following include the primary sources of information that are used as a part of all Quality Assurance processes.

- **Annual Local Plans – Service and Budget Plans**
- **California Special Education Management Information System (CASEMIS)**
- **California Basic Educational Data System (CBEDS)**
- **California’s Standardized Testing and Reporting (STAR) Program**
- **SAT 9 (STAR)**
- **California's Standardized Testing Coordinated Compliance Review (CCR) Self-Reviews**
- **Coordinated Compliance Review Data Base**
- **Special Education Division Complaints Data Base**
- **Special Education Division Corrective Actions Data Base**

This information and data constitute the core foundation of monitoring in Quality Assurance Process (QAP). Some of the routine review, analysis and verification activities include:

- **Local Plans are reviewed to determine compliance with federal and state laws.**
- **Coordinated compliance review documents are reviewed for noncompliant items and for patterns of noncompliance. Corrective action plans are made and monitored for each instance of noncompliance.**
- **Complaint and compliance trends are compiled and reviewed. Corrective action plans are made and monitored for each instance of noncompliance.**
- **Focused Monitoring reviews are based on key performance indicators that are calculated for each district, each year. These reviews are voluntary on the part of districts. However, each review includes a CDE conducted and supervised verification of the district’s data and compliance with federal and state law.**

Some of the routine review, analysis and verification activities include:

- **Local Plans** are reviewed to determine compliance with federal and state laws.
- **Coordinated compliance review documents** are reviewed for noncompliant items and for patterns of noncompliance. Corrective action plans are made and monitored for each instance of noncompliance.
- **Complaint and compliance trends** are compiled and reviewed. Corrective action plans are made and monitored for each instance of noncompliance.
- **Focused Monitoring reviews** are based on key performance indicators that are calculated for each district, each year. These reviews are voluntary on the part of districts. However, each review includes a CDE conducted and supervised verification of the district's data and compliance with federal and state law.

B. Quality Assurance Process

There are four primary elements of CDE monitoring that provide comprehensive and timely pressure to achieve and sustain compliance statewide. They are closely linked and coordinated. CDE staff conduct:

1. **ANNUAL REVIEW OF LOCAL PLANS**, including service and budget plans that are submitted each year under California law;
2. **COORDINATED COMPLIANCE REVIEW** activities, including the submission of comprehensive self reviews of compliance with federal and laws and CDE conducted verification processes;
3. **COMPLAINT INVESTIGATIONS AND COMPLAINT MANAGEMENT** activities, including the proactive reviews of districts subject to a large number or a particular type of complaint; and
4. **FOCUSED MONITORING** activities, which include CDE conducted and supervised verification of compliance and student data. Participation in Focused Monitoring is voluntary. Districts who participate in Focused Monitoring have agreed to go beyond minimum levels of compliance to achieve higher standards of student achievement and outcomes.

These four monitoring elements are based on the required submission of data and other evidence by all LEAs. CDE staff utilize a number of review, analysis and verification activities to evaluate the information provided by the districts. CDE uses various enforcement tools to correct all instances of noncompliance. More detailed description of the four elements of QAP will follow.

C. Enforcement Tools

There are several types of enforcement tools that are made to identify and address instances of individual and widespread findings of noncompliance.

1. **Corrective actions** are developed and monitored

- Corrective actions are developed for each instance of noncompliance (complaints, compliance reviews, CCR, etc.)
 - Monitored for completeness and timely resolution through Corrective Actions data base
 - Follow-up to prior corrective actions reviewed in subsequent monitoring activities
2. Sanctions are imposed
- Withholding of federal Part B dollars
 - Non-approval of local plans which would cause federal and state dollars to stop flowing
 - Requiring local boards of education to hold public hearings to address serious noncompliance and how the district will come into compliance with state and federal law
 - Requesting a writ of mandate within a state court to order compliance with a corrective action plan. (Should the LEA not comply, contempt proceedings would follow.)
3. CDE provides individual, regional and statewide training and technical assistance
- Preparing and delivering materials, training and technical assistance related to federally-identified areas of noncompliance
 - Analysis of due process, complaint and compliance findings to identify needs for proactive, statewide intervention and prevention
 - Identification of regional issues and concerns through the regional coordinating councils of the Comprehensive System of Personnel Development (CSPD)
 - Identification of statewide issues through the Partnership Committee of the State Improvement Grant
 - Delivery of intensive, systems change support to districts involved in Facilitated and Collaborative monitoring processes

More detailed description of required information, CDE analysis, monitoring processes and enforcement is contained in the following sections.

II. DETAILS OF REQUIRED ANNUAL EVIDENCE of COMPLIANCE from LEAs and SELPAs

Compliance is monitored by the CDE, on an annual basis for each of its 1,066 LEAs and 117 SELPAs. The California Department of Education requires LEAs to submit a wide variety of information on an annual basis. This information addresses their policies and procedures, their budget and services, an assessment of their compliance with federal and state laws (250 districts each year) and information about the students, programs, and outcomes. The data we receive,

analyze and verify is the very underpinning of all our monitoring and supervision efforts and the Quality Assurance Process. The following are the sources of information that are used as a part of all Quality Assurance processes.

A. Primary Data Sources

1. Annual Local Plan Submission to CDE

Each of the 117 Special Education Local Plan Areas (SELPA), covering the 1,066 LEAs, prepare and submit policies and procedures as one component of their local plan. The local plan process is one component of required annual LEA procedures to ensure a free appropriate public education (FAPE) for individuals with exceptional needs.

2. CASEMIS

The California Special Education Management Information System (CASEMIS) is an information reporting and retrieval system, designed for electronic submission of individual student level data twice each year by local agencies to the state, as authorized by state and federal laws. The purposes of this system are to:

- (1) monitor special education programs for compliance;
- (2) provide data to guide planning, policy making, and administration;
- (3) conduct research on programs;
- (4) evaluate programs;
- (5) meet statutory data requirements;
- (6) project future needs;
- (7) share data with other state and local agencies; and
- (8) develop data standards.

CASEMIS contains information encompassing every student in special education and includes student demographics, services provided, most recent assessments and Individual Education Program (IEP) dates and information about districts and agencies of residence and service.

3. CBEDS

The California Basic Educational Data system (CBEDS) is a statewide database which has as its data sources county offices of education and school districts. CBEDS gathers information on staff and student characteristics as well as enrollment and hiring practices. Three separate forms are used to collect these data: the County/District Information Form, which gathers data on staff and enrollment; the School Information Form, which collects staff and enrollment data specific to schools; and the Professional Assignment Information Form, which collects data on certificated staff from county offices of education and local school districts.

4. SAT 9 (STAR)

California's Standardized Testing and Reporting (STAR) Program was enacted by Senate Bill 376 (Chapter 828, Statutes of 1997). The State Board of Education selected the multiple-choice portion of the Stanford Achievement Test, Ninth Edition, Form T (Stanford 9) as the test to be administered each spring to all students in grades 2 through 11. California Education Code requires that all students be tested. A student background information survey administered as a part of the assessment identifies examinees receiving special education services.

5. Coordinated Compliance Review (CCR) Self-Review Instrument

The CDE conducts CCR reviews on 250 LEAs annually, as part of the 100% cycle. The self-review instrument, including the compliance self-review, must be completed and sent to the CDE by June 30 of the year preceding the scheduled review. The 250 local agencies involved in the Coordinated Compliance Review, ensure, through the self-review document, that they are in compliance for all programs they provide including local K-12, preschool, and birth to age three year programs.

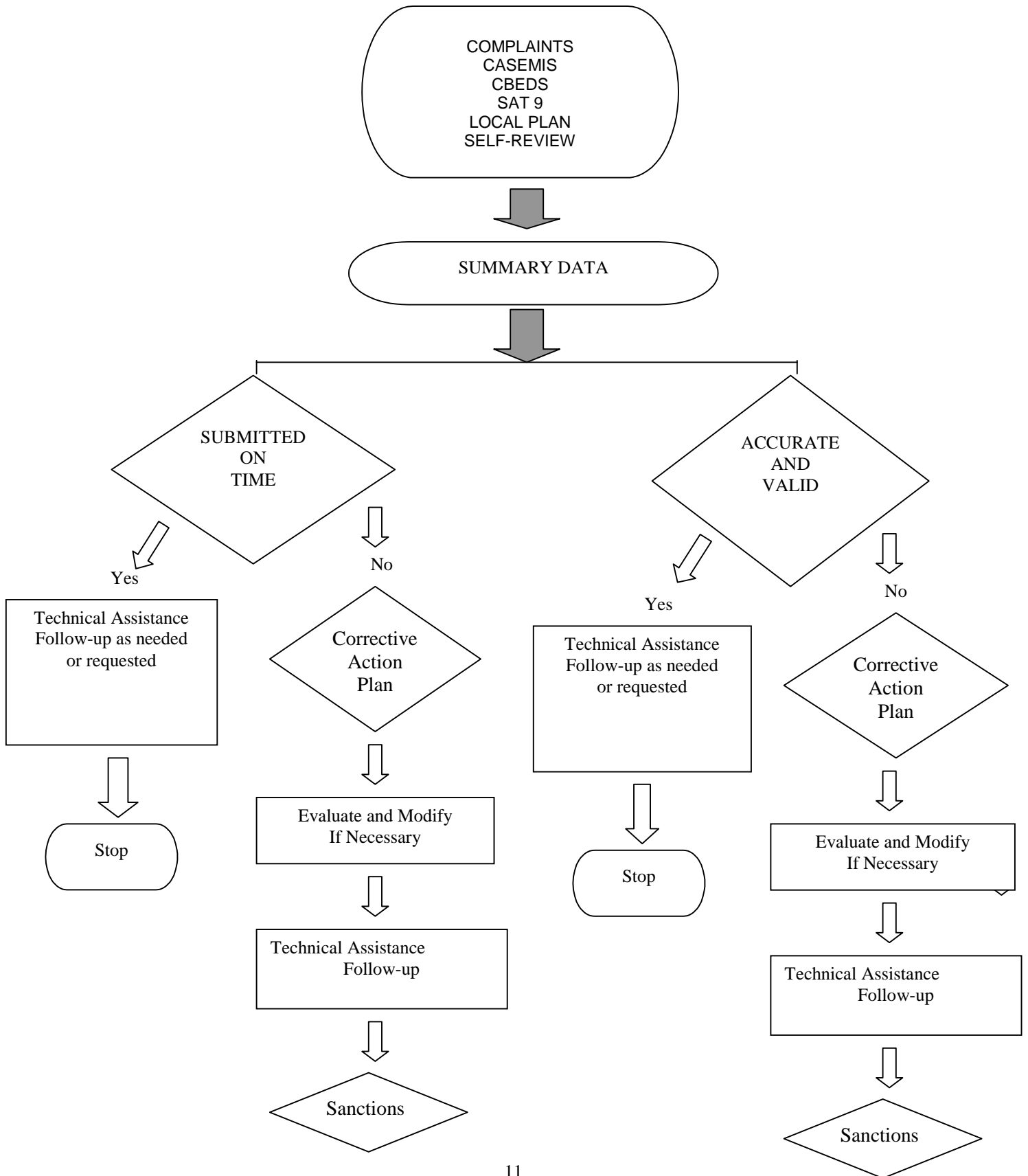
The results of the self-review are sent to CDE's Special Education Division and are examined by a Focused Monitoring consultant for noncompliant items. Local agencies are required to develop a corrective action for each noncompliant item, under the supervision of CDE staff. The consultant monitors the agency in correcting noncompliance in a complete and timely manner. Each corrective action...including response and timeline...is monitored through the same Corrective Action database used for complaints management. As with individual complaints, sanctions are applied for not completing compliance corrective actions.

6. Complaint Management

When a formal written complaint has been filed with CDE's Special Education Division, the division provides written notice to the school district, SELPA and complainant of the pending complaint (typically within 48 hours). Federal law requires the state to complete an investigation and issue a report with decisions of compliance within 60 days. During the first two weeks, LEAs are encouraged to investigate allegations locally and if necessary, carry out corrective actions. If the complainant signs agreement with the results of the local investigation, the state considers the allegations of noncompliance to be resolved and the case is closed. CDE requires that LEAs submission of findings, decisions of compliance and corrective actions (as appropriate) with evidence of resolution. If the complainant does not sign off, the state investigation continues until the state investigation consultant has validated and or supplemented local efforts to determine and correct noncompliance. If the school district does not complete a local investigation process, the state investigation consultant implements the standard investigation process and issues a written report within the 60-day timeline. Within 35 days of receipt of the final report, either party may request that the State Superintendent of Public

Instruction reconsider the final report. The Superintendent may, within 15 days of receipt of the request, respond in writing to the parties and modify the conclusions or required corrective actions of the CDE report. Pending the Superintendent's discretionary reconsideration, the Department report remains in effect and enforceable.

Special Education Division Data Compliance Management



B. Other Data Analysis and Results

1. Key Performance Indicators (KPIs)

The Focused Monitoring component of the Quality Assurance Process (QAP) uses key performance indicators (KPIs) that are aligned with the Special Education Division Goals. A stakeholder group, composed of field professionals and advocates who have experience and knowledge of special education, provided input and clarified issues in the development of QAP and the KPIs. The KPIs are used to monitor the practices in an educational agency that relate to effective learning for students and the enforcement of the protections guaranteed under law to them and their families. Those KPIs that are valid and reliable measures of goal attainment are used to select school districts for monitoring as the KPIs are calculated for every district every year.

KPI data are also used to identify districts that will participate in Facilitated, Collaborative and Preferred-Practices Reviews.

- Facilitated Reviews are conducted with districts whose results in key performance indicators (KPIs) are most frequently in the lowest 15% of districts.
- Collaborative Reviews are conducted over a two-year period of time with districts whose KPI data are less frequently in the lowest 15% of districts.
- Preferred-Practices reviews occur when districts are selected from the top 15 percent of the state's districts that exhibit exemplary results meeting CDE goals.

All selected Focused Monitoring districts - facilitated, collaborative, and preferred-practices districts - receive a CDE conducted and supervised verification of district compliance and state level data.

An additional, random sample of districts is selected for Verification Reviews, drawn from the districts identified for participation in the Coordinated Compliance Review process for the year. These Verification Reviews consist of a review of 60-100 student records for compliance with state and federal laws and regulations, review of federal and state frequent noncompliance items and follow-up to prior corrective actions.

2. Complaint and Compliance Trends

The Complaints Management and Mediation Unit, Focused Monitoring Technical Assistance Regional Consultant, and CDE legal staff continuously review complaint and compliance trends. When a district has a large number of complaints and noncompliance findings, CDE staff initiate a review of complaints and complaint

management systems with the district superintendent. Technical assistance is planned and provided by CDE, via the district superintendent, to develop and implement corrections to the district's systemic areas of noncompliance.

3. Compliance History

As a part of reviewing a district's self-review, preparation for a focused monitoring review, or any other technical assistance review, CDE staff analyze information about the district's compliance history. This consists of a review of complaints, CCR noncompliance findings, and due process and mediation results. Information from these sources are "triangulated" to identify areas for more intensive scrutiny and also verify lasting correction to previous noncompliant issues.

4. Student Outcome History

As a part of preparing for Focused Monitoring reviews, CDE staff are provided with extensive information about a district's program. This includes demographic and administrative information as well as key performance indicators (KPIs) and other data that summarizes the district's outcomes over time, across age/grade levels, and by disability (where available). This information is used in combination with compliance information to assist the CDE staff person and the district to plan and conduct a more rigorous inquiry into the district's policies, practices and results.

III. QUALITY ASSURANCE PROCESS

There are four primary elements of CDE monitoring that provide comprehensive and timely pressure to achieve and sustain compliance statewide. They are closely linked and coordinated.

A. Local Plan Reviews

Each local plan, including service and budget plans, is reviewed by CDE for compliance with state and federal laws, particularly to assure that our LEAs are fulfilling their required responsibilities to provide every eligible student with a Free Appropriate Public Education. Inconsistencies are discussed with each district and SELPA and corrections are made before approval by the State Board of Education. Each local plan must demonstrate that the SELPA has in effect policies, procedures, and programs that are consistent with state laws and regulations, including:

- (1) free and appropriate public education**
- (2) full educational opportunity**
- (3) child find and referral**
- (4) individualized education programs**
- (5) least restrictive environment**
- (6) procedural safeguards**

- (7) assessments
- (8) confidentiality
- (9) transition
- (10) private schools
- (11) compliance assurances
- (12) governance and administration
- (13) joint powers and contractual agreements
- (14) personnel development
- (15) personnel standards
- (16) performance goals and indicators
- (17) participation in statewide and district-wide assessments
- (18) supplementation of funds
- (19) maintenance of effort
- (20) public participation and
- (21) suspension and expulsion rates.

In addition, California law requires the submission of the annual service and budget plans. These have been adopted at public hearings held by the SELPA. The annual service plan contains a description of services provided by each district and county office including the nature of services and physical location at which the services will be provided. The description must demonstrate that all individuals with disabilities have access to services and instruction appropriate to meet their needs as specified in their IEPs. The annual budget plan identifies expenditures that correlate to the annual service delivery plan.

Approval of the annual service delivery and budget plans by the State Board of Education authorizes the California Department of Education to flow funding to the special education local plan areas (SELPA). Without this State Board approval, there is no authority for CDE to disburse these funds. The service and budget plan process presents a yearly opportunity to initiate severe fiscal sanctions on local education agencies with compliance problems.

B. Coordinated Compliance Review

1. Self-Review Instrument

The CDE conducts CCR reviews on 250 LEAs annually, as part of the 100% cycle. The self-review instrument, including the compliance self-review, must be completed and sent to the CDE by June 30 of the year preceding their scheduled review. The Quality Assurance Process (QAP) is designed, along with other California Department of Education mechanisms, to enforce the protections guaranteed under state and federal law for students and their families. The 250 local agencies involved in a Coordinated Compliance Review ensure, through the self-review document, that they are in compliance for all programs they provide, including local K-12, preschool, and Early Start Programs (birth to age three). The results of the self-review are sent to CDE's Special Education Division and are

examined by a Focused Monitoring consultant for noncompliant items. Local agencies are required to develop a corrective action for each noncompliant item, under the supervision of CDE staff. The consultant monitors the agency in correcting noncompliance in a complete and timely way. Each corrective action - including response and timeline - is monitored through the same Corrective Actions database used for complaints management. As with individual complaints, sanctions are applied for not completing compliance corrective actions.

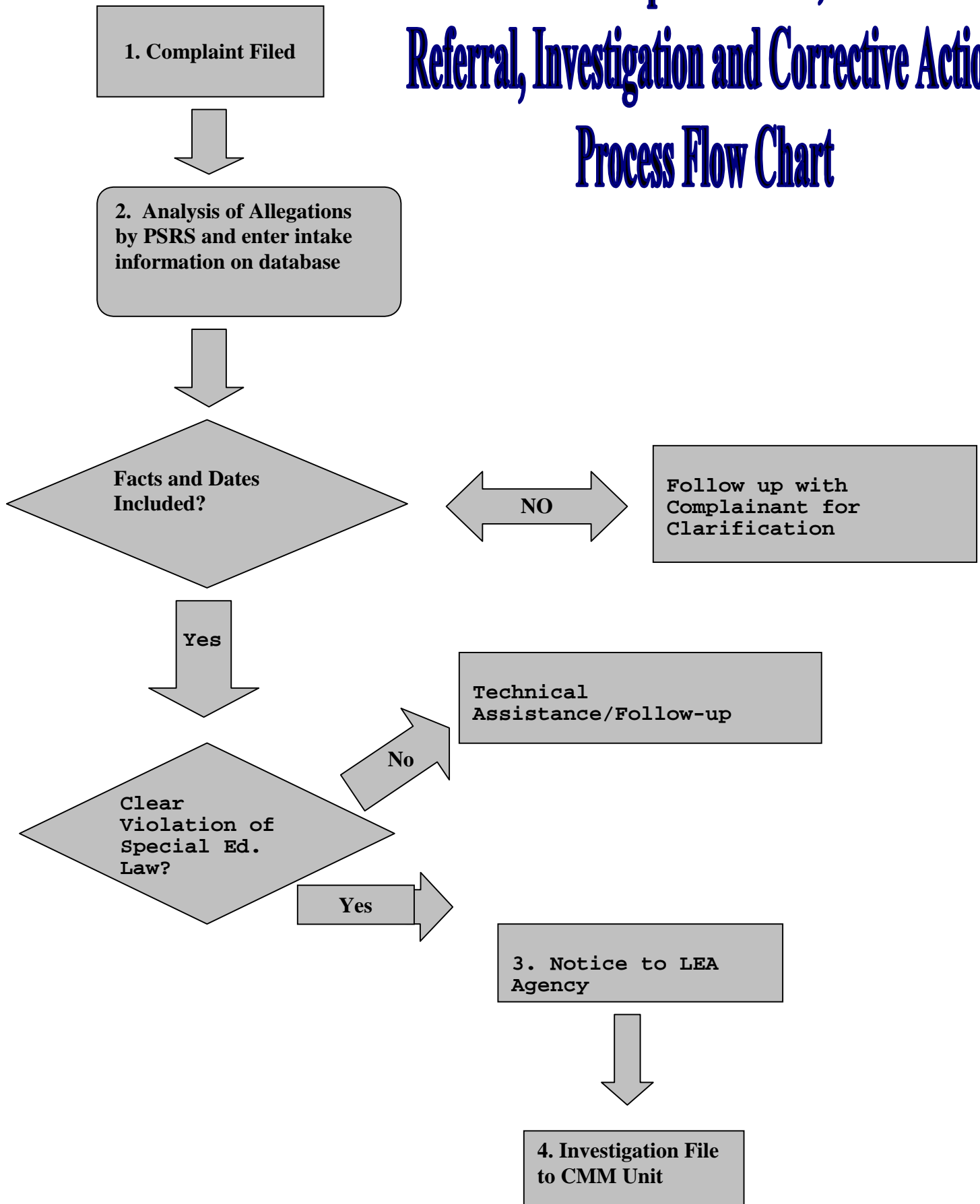
2. Coordinated Compliance Review Data Base

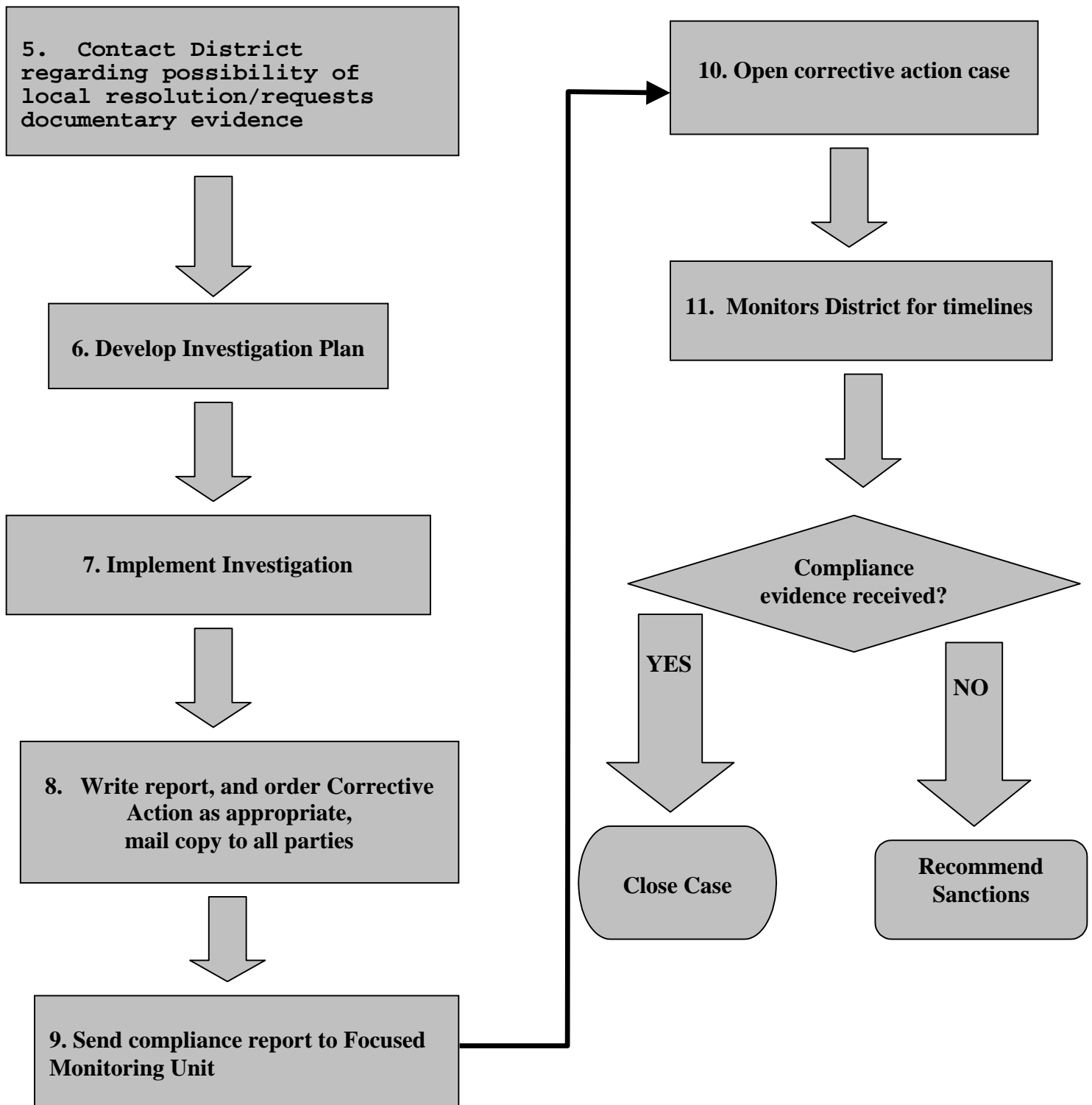
By the third quarter of the fiscal year (January -March 2000), the Special Education Division will have direct electronic access to the District Integrated View System. (Currently, specific data runs are requested from CCR management.) This system, currently being upgraded, will allow special education consultants to view and interact with the following collections of information: Coordinated Compliance Review, including historical compliance data for past 15 years, Consolidated Programs' Descriptions, and Compliance Tracking System. This system includes the current status of outstanding compliance items for all categorical programs. This system will also enable data profiles to be more accurate, will inform the monitoring and compliance assurance processes, and will be available to all consultants for purposes of compliance and complaint management and follow-up to prior corrective actions.

C. Complaint Management

When a formal complaint has been filed with CDE's Special Education Division, the division provides written notice to the school district, SELPA and complainant of the pending complaint (typically within 48 hours). Federal law requires the state to complete an investigation and issue a report within 60 days. During the first two weeks, LEAs are encouraged to investigate allegations locally and if necessary, carry out corrective actions. If the complainant signs agreement with the results of the local investigation, the state considers the allegations of noncompliance to be resolved and the case is closed. If the complainant does not sign off, the state investigation continues until the state investigation consultant has validated and or supplemented local efforts to determine and correct noncompliance. If the school district does not complete a local investigation process, the state investigation consultant implements the standard investigation process and issues a written report within the 60-day timeline. Within 35 days of receipt of the final report, either party may request that the State Superintendent of Public Instruction reconsider the final report. The Superintendent may, within 15 days of receipt of the request, respond in writing to the parties and modify the conclusions or required corrective actions of the CDE report. Pending the Superintendent's discretionary reconsideration the Department report remains in effect and enforceable. The following chart visualizes this process:

Complaint Intake, Referral, Investigation and Corrective Action Process Flow Chart





D. Focused Monitoring and Other CDE Monitoring Efforts

As required in IDEA regulations (CFR 300.137 Performance Goals and Indicators), California has commitment and activities that address performance goals and indicators for children with disabilities in the state that:

- **Ensure that all children with disabilities have a free and appropriate public education that emphasizes special education and related services designed to meet their unique needs; and**
- **Prepares them for employment and independent living;**
- **Ensures and protects the rights of children and their parents; and**
- **Assesses and ensures the effectiveness of efforts to educate children with disabilities.**

California performance goals and indicators are consistent, to the maximum extent appropriate, with other goals and standards for ALL CHILDREN established by the state. The Focused Monitoring efforts of the CDE's Quality Assurance Process, expand upon, and closely link with, the required SEA and LEA compliance efforts to provide ongoing, systemic implementation of improved results for children with disabilities. The volunteer districts participating in the focused monitoring efforts have both desire and commitment to ensure and go beyond federal and state compliance to promote and demonstrate improved results for children with disabilities.

For the 1999-2000 transition year, the CDE and the volunteer Facilitated and Collaborative districts utilize a data informed system through key performance indicators and compliance to research, analyze, verify and plan for addressing the Special Education Division goals at the local level.

1. Focused Monitoring Reviews

CDE monitors the activities of all LEAs to ensure that they fulfill their responsibilities of all LEAs to ensure that they fulfill their responsibilities under federal and state laws for students with disabilities. Focused monitoring reviews is one of four major methods for ensuring compliance.

KPI data are used to identify districts that will participate in facilitated, collaborative and Preferred-Practices reviews.

- **Facilitated Reviews occur when an LEA's data frequently places them in the lowest 15% of districts statewide. District KPI data is verified under the supervision of CDE staff and a district leadership team under the general direction of the district superintendent conducts an intensive self-review of compliance and student outcomes and develops a plan for district and student results in specific areas. This is a two to three year process.**

- **Collaborative Reviews** occur when a LEA's data places them in the lowest 15% of the state, though not as frequently as data points in facilitated. District KPI data is verified under the supervision of CDE staff and a district leadership team, under the general direction of the superintendent, conducts an intensive self-review of compliance and student outcomes and develops a plan for district and individual student results. This is a two year process.
- **Preferred-Practices** reviews occur when districts are selected from the top 15 % of the state's districts that exhibit exemplary results meeting CDE goals as evidenced by KPI data. Once verification of preferred-practices districts' outcomes are verified, they will be referred as mentors to districts needing assistance in achieving quality outcomes for children.

Unlike the above reviews, the Verification Reviews are drawn from the districts identified for participation in the Coordinated Compliance Review process for the year. The Verification Reviews consist of a review of 60-100 student records for compliance with state and federal laws and regulations, review of federal and state frequent noncompliance items and follow-up to prior corrective actions.

All chosen focused monitoring districts - facilitated, collaborative, and preferred-practices districts - receive a CDE conducted and supervised Verification Review process of district compliance and student level data submitted to the CASEMIS system.

2. Other Monitoring Visits

a. Based on Complaints and Compliance Trends

As noted above, the Complaints Management and Mediation Unit staff, Focused Monitoring and Technical Assistance Regional Consultants, and CDE legal staff continuously review complaint and compliance trends. When a district has a large number of complaints and noncompliance findings, CDE staff initiates a review of pattern complaints and local complaint management systems with the district superintendent. Technical assistance is planned and provided by CDE, via the district superintendent, to develop and implement corrections to the district's systemic areas of noncompliance.

b. Based on the Number or Complexity of Noncompliant Self-review Findings

The resolution of CCR self-review findings may suggest, when coupled with the district's compliance history, that there is a need to conduct a wider discussion and review of the district's practices and compliance. This may result in an onsite

review for the purposes of developing a more comprehensive understanding of noncompliance and development of more effective corrective action plans.

E. Numbers of Students Represented in Districts Being Monitored

An illustration of the CDE compliance data management process may be found on page 15 and a table “Estimated Number of Students Receiving Special Education Services in Districts Monitored in 1999-2000” below. Please see the table below, “California Department of Education, Special Education Division, Estimated Number of Students Receiving Special Education Services in Districts Monitored during 1999-2000” and Attachment 1, which provides an overview of the types of monitoring and the students enrolled.

**Estimated Number of Students Receiving Special Education Services
In Districts Monitored During 1999-2000
By Type of Monitoring**

Monitor Type	Enrolled	Pct
Local Plan & Compliance/Complaint	3,972	0.6%
Local Plan/Collaborative (Facilitated framework)	2,084	0.3%
Local Plan/Collaborative	3,030	0.5%
Local Plan/Verification/CCR	5,813	0.9%
Local Plan/CCR	9,088	1.4%
Local Plan Only	114,809	18.2%
Compliance/Complaint & Collaborative	19,261	3.0%
Compliance/Complaint & Verification	3,094	0.5%
Compliance/Complaint & CCR	70,892	11.2%
Compliance/Complaint	1,241	0.2%
Facilitated/CCR	351	0.1%
Facilitated Only	3,581	0.6%
Collaborative (Facilitated framework)/CCR	2,299	0.4%
Collaborative/CCR	386	0.1%
Collaborative Only	8,831	1.4%
Verification/CCR	24,838	3.9%
CCR Only	104,317	16.5%
All Monitored	377,887	59.8%
All California	632,238	100.0%

IV. ENFORCEMENT TOOLS

A. Corrective Actions and Enforcement

Whenever monitoring activities identify instances of noncompliance (complaints, compliance reviews, self-reviews, etc.), CDE imposes and monitors corrective action plans. These corrective actions need to be, and are IEP/child specific. The goal of the corrective action plan is to assure that the LEA fulfills its required responsibilities for students with disabilities under federal and state laws. For complaints, these are developed as a part of the complaint investigation and reporting process. For other findings of noncompliance (e.g.: CCR self-reviews, compliance verification for Focused Monitoring reviews, or LEA self-study processes in Focused Monitoring), local agencies are required to, under the supervision of CDE staff, develop a corrective action for each noncompliant item. The consultant monitors the agency in correcting noncompliance in a complete and timely way. Each corrective action, including required actions, response and timeline, is monitored through the same Corrective Actions database used for complaints management.

B. Sanctions

CDE is required to have sanctions for LEA noncompliance that can reasonably be expected to compel compliance where necessary. As you are aware, there are no objective standards as to specific sanctions that are required. If OSEP believes our sanctions are not appropriate, or that other sanctions are required, it is important for OSEP to communicate that to us directly. California's sanctions include:

1. Withholding of federal Part B dollars
2. Disapproving local plans which would cause federal and state dollars to stop flowing
3. Requiring local boards of education to hold public hearings to address serious noncompliance and how the district will come into compliance with state and federal law
4. Requesting a writ of mandate within a state court to order compliance with a corrective action plan. (Should the LEA not comply, contempt proceedings would be instituted.)

C. CDE Provides Individual, Regional and Statewide Training and Technical Assistance

The California Department of Education, (CDE), through training and technical assistance to local educational agencies supports the goal of continuous improvement utilizing research-based practices consistently applied at the student level. The State Improvement Grant and CDE funded activities provide technical assistance and training to educators, service providers, and families/consumers for the local and regional implementation and application of research-based practices and system improvements particularly impacting positive student results in reading and behavior.

Intensive technical assistance is focused on:

- Federally-identified areas of noncompliance
- Frequent statewide noncompliance items. Analysis of due process, complaint and compliance findings is used to identify needs for proactive, statewide intervention and prevention
- Identification of regional issues and concerns is done through the regional coordinating councils of the Comprehensive System of Personnel Development (CSPD)
- Identification of statewide issues is also done through the Partnership Committee of the State Improvement Grant
- Delivery of intensive, systems change support is provided to districts involved in Facilitated and Collaborative monitoring processes

School districts are targeted for this technical assistance and customized training through the Quality Assurance Process which includes local district data analysis of individual complaints and due process findings. Technical assistance services provided to LEAs involves customized training and information dissemination in knowledge, skill development, guided implementation, application, and ongoing coaching in research-based best practices and systems improvements.

The comprehensive system of personnel development (CSPD) is designed to ensure an adequate supply of qualified special education, regular education, and related services personnel to meet the needs of children with disabilities. California Services for Technical Assistance and Training (CalSTAT) assists the CDE to fulfill the mandated components of the CSPD and to implement the State Improvement Grant. CalSTAT supports the Partnership Committee on Special Education, a diverse and representative group of individuals concerned with the education of children with disabilities. The Partnership was formed to help create a foundation for the State Improvement Plan (SIP) and the State Improvement Grant (SIG). CalSTAT also supports the California Education Innovation Institute (CEII) to offer training for educators, administrators, family members and others who are interested in developments in special education. CalSTAT utilizes Resources in Special Education (RiSE), to develop and disseminate information on current issues, new research and effective programs. In addition to publishing a bimonthly newsletter, The Special Edge, RiSE maintains one of the largest specialized resource collections on special education and early intervention in the nation.

All enforcement tools – Corrective Actions, Sanctions, and Technical Assistance-- are used consistently and in combination, as needed to support achievement of compliance with state and federal law.

- A. *CDE has described verbally and in writing, its proposals for facilitated, collaborative, and verification monitoring reviews, as well as its proposals for resolving complaints under 34 CFR 300.660-300.662*
 1. *How will CDE use the Key Performance Indicator (KPI) data and other methods to ensure that it appropriately monitors, and ensures compliance*

by, public agencies for which it appears that many of the KPI data would not be applicable and/or available?

Answer: As mentioned above KPIs are used to determine which districts will be involved in Focused Monitoring reviews (Facilitated, Collaborative, Verification, Preferred Practices). All four types of these reviews include a state supervised and implemented review of compliance through the verification process. All forms of review include data verification and compliance checks using 60 to 100 student files.

It is important to note that KPIs are only one means to identify districts needing more in-depth review. CCR findings, Local Plan reviews and complaint/compliance trends must all trigger more in-depth reviews:

- **Coordinated Compliance Review Findings:** Annually, 250 of districts in the state conduct a self-assessment on their compliance and noncompliance with IDEA, Part B and C (if applicable). CDE reviews all self-reviews, follows up on all corrective action plans, documents resolution, and implements sanctions, as appropriate. Each district utilizes the CDE developed self-review document that addresses all areas of IDEA and state laws and regulations.
- **Annual Service Plan and Budget Plan:** As part of phasing in Assembly Bill (AB) 602, selected SELPAs are now required to annually submit to CDE specific information (Annual Service Plan) regarding the provision of a FAPE to all students within their jurisdiction and their fiscal accountability plan ensuring FAPE. This information is in addition to their written policies and procedures ensuring compliance with IDEA. This new process, legislated through AB 602, has provided CDE with increased and more specific information for monitoring and supervision of districts. For this 1999-2000 transition year, the CDE oversight, supervision and monitoring of local plan compliance constitutes 25.3% of districts in the state. As legislated, by June 30, 2003, all districts (1,066) in California through the SELPA will annually submit a service and budget plan.
- **Complaint Management and Corrective Action Oversight:** The number of complaints and noncompliance findings trigger a team of special education consultants from the CMM and FM/TA units, combined with legal resources, to improve and to follow up on noncompliance with a corrective action plan. Beginning July 1, 1999, the Focused Monitoring Units provided three analysts to monitor all complaint investigation findings of compliance and noncompliance statewide. The newly developed data base provides detailed delineation of allegations, findings of compliance or noncompliance, corrective actions with specific timelines for each allegation, and tracking of resolution of noncompliance including sanctions, as

appropriate. California estimates that approximately 850 complaints will be investigated and resolved by the end of this fiscal year.

- **Procedural Guarantees Plan:** As part of the district's Quality Assurance Agreement for this transition year, each Facilitated, Collaborative, Verification and Preferred-Practices district will conduct an intensive, systemic study of compliance which results in a reporting of noncompliant areas, corrective actions and timelines. This Procedural Guarantees Plan is submitted to the CDE for monitoring of resolutions consistent with IDEA. This is done by the LEA in partnership with the CDE. All areas of noncompliance have documented corrective actions with reasonable timelines applied. The CDE continues its monitoring and supervision of the Procedural Guarantees Plan. These districts will also utilize CDE's developed compliance document that covers all areas of IDEA and state laws and regulations.
- **Compliance Management through CDE teaming:** The Complaints Management and Mediation Consultants, Focused Monitoring regional consultants, and CDE legal staff initiate and meet with a district superintendent for districts who have a large number of complaints and noncompliance findings. Technical assistance is planned and provided by CDE, via the district superintendent, to address the district's systemic areas of noncompliance.

Findings of noncompliance result in a corrective action plan. For complaints, these are developed as a part of the complaint investigation and reporting process. For other findings of noncompliance, for example CCR, Compliance Verification for Focused Monitoring reviews, or LEA self-study processes in Focused Monitoring, local agencies are required, under the supervision of CDE staff, to develop a corrective action for each noncompliant item. The consultant monitors the agency in correcting noncompliance in a complete and timely manner. Each corrective action, including required actions, response and timeline, is monitored through the same corrective actions database used for complaints management. As with individual complaints, sanctions are applied for not completing compliance corrective actions.

2. What, if any, other procedures will CDE use to monitor public agencies for compliance?

Answer: The verification process is the initial process used to monitor compliance in all types of Focused Monitoring. Generally, the verification process consists of a review of 60 to 100 individual student records selected at random using CASEMIS

data. The reviews are conducted by a team made up of CDE staff, consultants and LEA personnel trained to use CDE file review materials. In order to prepare for the review, the CDE consultant will determine which other LEAs serve children who are residents of the district (e.g., County Office of Education). These other locations must be included in the verification review, based on the random selection of individual student records. The consultant would also secure information about the district's compliance history of CCR noncompliance, Complaints and Due Process hearings. The CDE consultant follows-up on prior corrective actions and identifies any special compliance areas needing verification. Lastly, the consultant will secure: a list of individual student records to review; CASEMIS data for the selected students, and a listing of the appropriate compliance review form to use for each student record.

In order to reduce the amount of information that needs to be reviewed in any single record, Part B requirements will be randomly assigned to five different forms and Part C items will be randomly assigned to three different forms. Each form will include items from all of the sections of the requirements. Forms will be randomly assigned to individual student records. In this way, all forms will be used to review individual student records in the district.

To prepare the LEA for the review, the CDE consultant contacts the district to confirm the department's participation, schedule the visit, describe the process, solicit the participation of district staff and to inform the team about CASEMIS data. The consultant also assists in the review of records for CASEMIS, provides technical assistance, determines a location where the record review will take place and answers questions the district superintendent may have. In addition, the consultant verifies the need to include additional LEAs serving children who are residents of the district. Additional calls are made to other LEAs participating in the review.

A follow-up letter is sent to the districts involved to confirm the dates, the location, the participation of staff and the type of information that will need to be assembled for review of individual student records. The letter also specifies a date prior to the review when the list of student records will be sent to the district. Two to three days prior to the review, the consultant sends, via fax or overnight mail, a list of individual student records to be pulled for review by the team to all of the districts participating in the review.

The CDE consultant will need to arrange a meeting with LEA staff associated with CASEMIS data. The purpose of this meeting is to trace the process of data entry from IEP meeting to submission to CDE. The second purpose is to inquire how decisions are made to "mark" certain CASEMIS codes. These questions will be supplied by the CDE Assessment, Evaluation and Support Unit (AES).

A second meeting is with the district staff and who will be working with CDE staff to review the records. This meeting will prepare the team to pull and review

records according to CDE requirements. A list of records will be selected to include 50-plus records of individual students who were reported to be in CASEMIS, as of April 1998 and 50-plus records of students who were exited, as of April 1998. The list provided by AES will be provided in a certain order, based on their random selection. The team will review at least 30, exited or not exited, records from each group. If an individual student record is missing or unavailable, a notation will be made about that record and the reviewers proceed until a total of 30 records have been reviewed in that group.

For CASEMIS, the forms require the reviewer to mark one of two boxes - "YES," the data can be confirmed from individual student records or "NO," the data are not present or cannot be confirmed from records. For compliance reviews the forms require the reviewer to mark one of three boxes - "YES," the individual student record complies with the item, "NO," the individual student record does not comply with the item, or "N/A," the item does not apply to the particular record begin reviewed. Each data sheet scored at this point to determine if there is a need to review additional records. If the first thirty individual student records in each group do not meet the following decision rules, then an additional 10 individual student records from that group are reviewed. If the individual student records from one of the groups does not meet the decision rules after reading 40 records, the final 10 records are reviewed (up to a total of 50 individual student records for each group).

For CASEMIS verification, use the following decision rules to determine the need to review additional individual student records:

Step 1.

Review 30 individual student records - review 10 more individual student records if:
3 individual student records are missing
3 individual student records with 5 "Nos"
100 total "Nos" out of the group of 30 individual student records (540 items)

Step 2.

Review 10 more individual student records - review another 10 more individual student records if:
1 additional individual student record is missing
4 individual student records with 5 "Nos" out of group of 40 individual student records
133 total "Nos" out of the group of 40 individual student records (720 items)

Step 3.

Review 10 more individual student records - recommend full audit if:
1 additional individual student record is missing
5 individual student records with 5 "Nos" out of group of 50 individual student records
166 total "Nos" out of the group of 50 individual student records (1000 items)

For Compliance Verification, use the following decision rules to determine the need to review additional records (“X” below indicates decision rules which are still under discussion):

Step 1.

Review 30 individual student records - review 10 more individual student records if:
3 individual student records are missing
X individual student records with X “Nos”
X total “Nos” out of the group of 30 individual student records (X items)

Step 2.

Review 10 more individual student records - review another 10 more individual student records if:
1 additional individual student record is missing
X individual student records with X “Nos” out of group of 40 individual student records
X total individual student records “Nos” out of the group of 40 individual student records (X items)

Step 3.

Review 10 more records- recommend full audit if:
1 additional record is missing
X records with X “Nos” out of group of 50
X total “Nos” out of the group of 50 (X items)

As a general rule, if the verification decision rule is met for a given group - exit/no exit or for a given type - compliance/CASEMIS - the team must discontinue reviewing individual records for that group and type. For example, if after 30 records, the CASEMIS data for the no exit group is okay, the team must discontinue reviewing CASEMIS data for the no exit group. However, the team should continue to review compliance for the no exit group until the scoring is less than the decision rule amount. Based on the information about the district’s compliance history, the consultant should arrange to review individual student records and conduct interviews with appropriate staff to determine that appropriate corrective actions have occurred and that similar compliance problems have not resurfaced.

The consultant will schedule a debriefing with the district superintendent and selected staff. The purpose of the debriefing is to provide a quick overview of the process and preliminary findings. The visit should be followed by a report summarizing the results of the verification review. This is a simple, statistical summary of findings and requirements for follow-up. For CASEMIS data, the consultant confers with AES staff regarding the interpretation and need for revision of their CASEMIS system. For compliance items, consultants require corrective actions for all instances of noncompliance including individual child items as well as district-wide noncompliance issues. Districts with numerous district-wide

noncompliance items will be identified for the pool of facilitated, preferred practices, verification and collaborative districts for 2000-01.

In addition to the verification process, facilitated, collaborative and preferred practices districts will engage in additional self study processes suited to the respective purposes of the reviews. Facilitated and collaborative districts will utilize a variety of methods including surveys, interviews, focus groups, classroom visits, and involve a variety of audiences such as students, parents, advocates, staff and administrators, to expand their understanding of compliance problems and to identify the most meaningful, systemic corrective actions. CDE staff will participate in these processes and in the identification of additional, noncompliance items. Corrective actions are required for any instance of noncompliance through these processes, as well. District wide corrective actions include a variety of responses - policy changes, staff development, practice changes, etc. For broad-based CDE corrective actions, greater detail regarding the evaluation of corrective actions developed and monitored. The detail could, for example, include the desired outcomes of inservice, including methods and timelines for evaluating the outcomes.

In addition to reviews conducted as a part of Focused Monitoring, other types of compliance investigations may be triggered by CCR self-review findings, local plan reviews and complaint/compliance trends. These may be initiated as follows:

- Based on complaints and compliance trends, as noted above, the Complaints Management and Mediation Unit (CMM), FMTA Consultant, and CDE legal staff continuously review complaint and compliance trends. When a district has a large number of complaints and noncompliance findings, CDE staff initiate a review of pattern complaints and local complaint management systems with the district superintendent. Technical assistance is planned and provided by CDE, via the district superintendent, to develop and implement corrections to the district's systemic areas of noncompliance.**
- Based on the number and complexity of noncompliant self-review findings, the resolution of CCR self-review findings may suggest, especially when coupled with the district's compliance history, that there is a need to conduct a wider discussion and review of the district's practices and compliance. If so, this must result in an onsite review for the purposes of developing a more comprehensive understanding of noncompliance and development of more effective corrective action plans.**

3. Will CDE continue to implement the CCR procedures as a mechanism for determining compliance?

Answer: Yes. Coordinated Compliance Review procedures are ongoing and include self-review, the local plan, site visits and technical assistance. The CDE,

therefore, addresses compliance and noncompliance using the CCR process on a statewide on-going and annual basis. It is not overstated to say that 100% of districts in the state, as part of their annual plan writing process, self-assess their compliance with IDEA, Part B and C, as applicable. In addition, 25% of the total complete a written self-review every year.

The CDE reviews all self-reviews, follows up on all corrective action plans, documents resolution, and imposes sanctions, as appropriate. Each district utilizes the CDE self-review document and California Special Education Programs: A Composite of Laws handbook, that addresses all areas of IDEA, state laws and regulations to verify local compliance.

The CDE has expanded procedural compliance to place additional emphasis on student performance. Staff has been added to enable improved corrective action plan monitoring and follow-up as well as to provide additional technical assistance. Consultant emphasis on the use of data to support monitoring has also been increased.

4. If so, how will CDE revise the CCR process to make it an effective mechanism for determining compliance with the requirements of Part B?

Answer: Approximately 250 districts in the annual CCR pool complete compliance self-reviews in the year preceding the scheduled CCR activity. Additional local annual plan submission, CASEMIS and CBEDS data submissions, plus KPI data, provide a comprehensive evaluation of each district's compliance status. In some cases the resolution of CCR self-review findings will suggest, especially when coupled with the district's compliance history, a need to conduct a wider discussion and review of the district's practices and compliance. This will result in an onsite review for the purposes of developing a more comprehensive understanding of noncompliance and development of more effective corrective action plans. All follow-up and enforcement activities generated by the evaluations and data are systematically managed by CDE staff.

In addition to the above scheduled activities, districts are also identified at random from the CCR pool, to receive a verification review. Any instances of noncompliance result in follow-up and implementation of a corrective action plan. In future years, we will add additional factors related to our review, analysis and validation of data from this transition year. The University of California at Los Angeles validation study will also assist in our future data planning.

5. What are the differences between facilitated, collaborative and verification in terms of data and procedures used, reporting of noncompliance, and timelines for ensuring correction?

Answer: The verification process is the initial process used to monitor compliance in all types of Focused Monitoring. Generally, the verification process consists of a

review of 60 to 100 individual student records selected at random using CASEMIS data. The reviews are conducted by a team made up of CDE staff, consultants and LEA personnel trained to use CDE file review materials. In order to prepare for the review, the CDE consultant will determine which other LEAs serve children who are residents of the district (e.g., County Office of Education). These other locations must be included in the verification review, based on the random selection of individual student records. The consultant would also secure information about the district's compliance history of CCR noncompliance, Complaints and Due Process hearings. The CDE consultant follows-up on prior corrective actions and identifies any special compliance areas needing verification. Lastly, the consultant will secure: a list of individual student records to review; CASEMIS data for the selected students, and a listing of the appropriate compliance review form to use for each student record.

In order to reduce the amount of information that needs to be reviewed in any single record, Part B requirements will be randomly assigned to five different forms and Part C items will be randomly assigned to three different forms. Each form will include items from all of the sections of the requirements. Forms will be randomly assigned to individual student records. In this way, all forms will be used to review individual student records in the district.

To prepare the LEA for the review, the CDE consultant contacts the district to confirm the department's participation, schedule the visit, describe the process, solicit the participation of district staff and to inform the team about CASEMIS data. The consultant also assists in the review of records for CASEMIS, provides technical assistance, determines a location where the record review will take place and answers questions the district superintendent may have. In addition, the consultant verifies the need to include additional LEAs serving children who are residents of the district. Additional calls are made to other LEAs participating in the review.

A follow-up letter is sent to the districts involved to confirm the dates, the location, the participation of staff and the type of information that will need to be assembled for review of individual student records. The letter also specifies a date prior to the review when the list of student records will be sent to the district. Two to three days prior to the review, the consultant sends, via fax or overnight mail, a list of individual student records to be pulled for review by the team to all of the districts participating in the review.

The CDE consultant will need to arrange a meeting with LEA staff associated with CASEMIS data. The purpose of this meeting is to trace the process of data entry from IEP meeting to submission to CDE. The second purpose is to inquire how decisions are made to "mark" certain CASEMIS codes. These questions will be supplied by the CDE Assessment, Evaluation and Support Unit (AES).

A second meeting is with the district staff and who will be working with CDE staff to review the records. This meeting will prepare the team to pull and review records according to CDE requirements. A list of records will be selected to include 50-plus records of individual students who were reported to be in CASEMIS, as of April 1998 and 50-plus records of students who were exited, as of April 1998. The list provided by AES will be provided in a certain order, based on their random selection. The team will review at least 30, exited or not exited, records from each group. If an individual student record is missing or unavailable, a notation will be made about that record and the reviewers proceed until a total of 30 records have been reviewed in that group.

For CASEMIS, the forms require the reviewer to mark one of two boxes - "YES," the data can be confirmed from individual student records or "NO," the data are not present or cannot be confirmed from records. For compliance reviews the forms require the reviewer to mark one of three boxes - "YES," the individual student record complies with the item, "NO," the individual student record does not comply with the item, or "N/A," the item does not apply to the particular record being reviewed. Each data sheet scored at this point to determine if there is a need to review additional records. If the first thirty individual student records in each group do not meet the following decision rules, then an additional 10 individual student records from that group are reviewed. If the individual student records from one of the groups does not meet the decision rules after reading 40 records, the final 10 records are reviewed (up to a total of 50 individual student records for each group).

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100 total "Nos" out of the group of 30 individual student records (540 items)

Step 2.

Review 10 more individual student records - review another 10 more individual student records if:

1 additional individual student record is missing
4 individual student records with 5 "Nos" out of group of 40 individual student records
133 total "Nos" out of the group of 40 individual student records (720 items)

Step 3.

Review 10 more individual student records - recommend full audit if:

1 additional individual student record is missing

5 individual student records with 5 “Nos” out of group of 50 individual student records

166 total “Nos” out of the group of 50 individual student records (1000 items)

For Compliance Verification, use the following decision rules to determine the need to review additional records (an “x” below indicates decision rules which are still under discussion):

Step 1.

Review 30 individual student records - review 10 more individual student records if:

3 individual student records are missing

X individual student records with X “Nos”

X total “Nos” out of the group of 30 individual student records (X items)

Step 2.

Review 10 more individual student records - review another 10 more individual student records if:

1 additional individual student record is missing

X individual student records with X “Nos” out of group of 40 individual student records

X total individual student records “Nos” out of the group of 40 individual student records (X items)

Step 3.

Review 10 more records- recommend full audit if:

1 additional record is missing

X records with X “Nos” out of group of 50

X total “Nos” out of the group of 50 (X items)

As a general rule, if the verification decision rule is met for a given group - exit/no exit or for a given type - compliance/CASEMIS - the team must discontinue reviewing individual records for that group and type. For example, if after 30 records, the CASEMIS data for the no exit group is okay, the team must discontinue reviewing CASEMIS data for the no exit group. However, the team should continue to review compliance for the no exit group until the scoring is less than the decision rule amount. Based on the information about the district’s compliance history, the consultant should arrange to review individual student records and conduct interviews with appropriate staff to determine that appropriate corrective actions have occurred and that similar compliance problems have not resurfaced.

The consultant will schedule a debriefing with the district superintendent and selected staff. The purpose of the debriefing is to provide a quick overview of the process and preliminary findings. The visit should be followed by a report summarizing the results of the verification review. This is a simple, statistical

summary of findings and requirements for follow-up. For CASEMIS data, the consultant confers with AES staff regarding the interpretation and need for revision of their CASEMIS system. For compliance items, consultants require corrective actions for all instances of noncompliance including individual child items as well as district-wide noncompliance issues. Districts with numerous district-wide noncompliance items will be identified for the pool of facilitated, preferred practices, verification and collaborative districts for 2000-01.

In addition to the verification process, facilitated, collaborative and preferred practices districts will engage in additional self study processes suited to the respective purposes of the reviews. Facilitated and collaborative districts will utilize a variety of methods including surveys, interviews, focus groups, classroom visits, and involve a variety of audiences such as students, parents, advocates, staff and administrators, to expand their understanding of compliance problems and to identify the most meaningful, systemic corrective actions. CDE staff will participate in these processes and in the identification of additional, noncompliance items. Corrective actions are required for any instance of noncompliance through these processes, as well. District wide corrective actions include a variety of responses - policy changes, staff development, practice changes, etc. For broad-based CDE corrective actions, greater detail regarding the evaluation of corrective actions developed and monitored. The detail could, for example, include the desired outcomes of inservice, including methods and timelines for evaluating the outcomes.

In addition to reviews conducted as a part of Focused Monitoring, other types of compliance investigation may be triggered by CCR self-review findings, local plan reviews and complaint/compliance trends. These may be initiated as follows:

- Based on complaints and compliance trends, as noted above, the Complaints Management and Mediation Unit (CMM), FMTA Consultant, and CDE legal staff continuously review complaint and compliance trends. When a district has a large number of complaints and noncompliance findings, CDE staff initiate a review of pattern complaints and local complaint management systems with the district superintendent. Technical assistance is planned and provided by CDE, via the district superintendent, to develop and implement corrections to the district's systemic areas of noncompliance.
- Based on the number and complexity of noncompliant self-review findings, the resolution of CCR self-review findings must suggest, especially when coupled with the district's compliance history, that there is a need to conduct a wider discussion and review of the district's practices and compliance. This must result in an onsite review for the purposes of developing a more comprehensive understanding of noncompliance and development of more effective corrective action plans.

1. *For each of the three school years after 1999-2000; (a) How many additional districts will CDE monitor using a collaborative review (if this includes both districts that had a facilitated review the prior year and districts that did not, please differentiate between the two); and (b) What percentage of the State's total Part B child count will those additional districts represent?*

Answer: (a) This year is a legislative transition year. Our budget change proposal for 2000-2001 requests additional resources for Year One. It requests four new Facilitated Reviews and eight continuing Facilitated Reviews from the transition year. We would add on additional collaborative and verification reviews. How many is dependent upon additional legislative resources. (b) This is unknown at this point.

2. *For each of the three school years after 1999-2000: (a) How many additional districts will CDE monitor using a collaborative review (if this includes both districts that had a facilitated review the prior year and districts that did not, please differentiate between the two); and (b) What percentage of the State's total Part B child count will those additional districts represent?*

Answer: (a) In total, the CDE is annually monitoring compliance in the four elements of the Quality Assurance Process (Local Plan, Complaints Monitoring, CCR and Focused Monitoring) by districts representing 100% of the students in the Part B pupil count. This includes volunteer districts participating in Facilitated, Collaborative and Verification Reviews in addition to the district pupil counts for districts undergoing investigations for allegations of noncompliance during the fiscal year. The specific number of the types of district monitoring will be ascertained on an annual basis. (b) This is unknown at this point.

3. *For each of the three school years after 1999-2000: (a) How many additional districts will CDE monitor using a verification review; and (b) What percentage of the State's total Part B child count will those additional districts represent?*

Answer: (a) In total, the CDE is annually monitoring compliance in the four elements of the Quality Assurance Program (Local Plan, Complaints Monitoring, CCR and Focused Monitoring) by districts representing 100% of the students in the Part B pupil count. This includes districts participating in facilitated, collaborative and verification reviews in addition to the district pupil counts for districts undergoing investigations for allegations of noncompliance during the fiscal year. The specific number of the types of district monitoring will be determined on an annual basis. (b) This is unknown at this point.

4. *For each of the three school years after 1999-2000: (a) How many additional districts will complete a self-assessment, but not be*

monitored through a facilitated, collaborative, or verification review; and (b) What percentage of the State's total Part B child count will those additional districts represent?

Answer: (a) In total, the CDE is annually monitoring compliance in the four elements of the Quality Assurance Program (Local Plan, Complaints Monitoring, CCR and Focused Monitoring) by districts representing over 100% of the students in the Part B pupil count. This includes districts participating in facilitated, collaborative and verification reviews in addition to the district pupil counts for districts undergoing investigations for allegations of noncompliance during the fiscal year. The specific number of the types of district monitoring will be ascertained on an annual basis. (b) This is unknown at this point.

C. For each of the three types of monitoring reviews, by what date will CDE inform each of the districts that participates in a monitoring review during the 1999-2000 school year of all of CDE's findings of noncompliance identified in that review?

Answer: Districts are provided immediately with outcomes as soon as they are ascertained by the CDE. The CDE and LEAs work together in identifying, communicating and analyzing the data. CDE immediately provides LEAs with all finding of noncompliance as they are ascertained. If any noncompliant items are identified, a corrective action plan (CAP) is written establishing a timeline based on required district and stakeholder actions to achieve required change(s).

D. For each of the three types of monitoring reviews, what is CDE's timeline, from the beginning of the monitoring review to the date by which each of the districts that participates in a monitoring review in years subsequent to the 1999-2000 school year will have been informed of all of CDE's findings of noncompliance identified in that review?

Answer: Districts are provided immediately with outcomes as soon as they are ascertained by the CDE. The CDE and LEAs work together in identifying, communicating and analyzing the data. CDE immediately provides LEAs with all finding of noncompliance as they are ascertained. If any noncompliant items are identified, a corrective action plan (CAP) is written establishing a timeline based on required district and stakeholder actions to achieve required change(s).

E. Timelines for Facilitated reviews. The green introductory page (before page 21) of CDE's Quality Assurance Notebook discusses what will occur during the first year of facilitated reviews and implies that some phases of the process will not begin or be completed until after the first year. The timelines on page 26 show steps that will not occur until September 2000. Page 21 indicates that the facilitated review will take three years.

Given what appears to be a three-year timeline for each facilitated review, how will CDE demonstrate – within a year – the effectiveness of the facilitated review process?

Answer: Any district undergoing a Facilitated Review will correct all identified noncompliant findings. They will be monitored each year for compliance. Above and beyond this monitoring, the CDE will work with these districts pursuant to the five CDE goals:

- 1. The unique needs for specially designed instruction will be accurately identified for all students with disabilities.**
- 2. All students with disabilities will be served or taught by fully qualified personnel.**
- 3. All students with disabilities will be successfully integrated with non-disabled peers throughout their educational experience.**
- 4. All students with disabilities will meet high standards for academic and non-academic skills.**
- 5. All students with disabilities will successfully participate in preparation for the workplace and living independently.**

F. Timelines for Collaborative Reviews. The orange introductory sheet, before page 11, in CDE's Quality Assurance Notebook states that CDE and each district that will participate in a collaborative review must make a two year commitment to the quality assurance process. Page 12 describes the collaborative review process as a 2-year process.

- 1. Which steps of the collaborative review process will take more than one year?*

Answer: At a minimum, the CDE verification process and LEA systemic self-review of compliance issues will be completed and corrective actions developed in the first year. It is anticipated that other self-study issues related to student achievement and outcomes will similarly be completed in the first year. It is anticipated that the second year must include some study of effective program improvement strategies, such as literacy programs and dropout prevention, and implementation of program improvement efforts. Overall it is anticipated that program improvement efforts will extend beyond a two-year process.

- 2. What are the timelines for completing those steps?*

Answer: At a minimum, the verification process and LEA systemic self-review of compliance issues will be completed and corrective actions developed in the first year. It is anticipated that other self-study issues related to student achievement and outcomes will similarly be completed in the first year. It is anticipated that the second year must include some study of effective program improvement strategies,

such as literacy programs and dropout prevention, and implementation of program improvement efforts. Overall it is anticipated that program improvement efforts will extend beyond a two-year process.

3. Timelines for collaborative review culminates in June 2000 with Superintendents signature on the agreement:

a. What steps will CDE take if Superintendent does not sign the agreement by the end of June?

Answer: Both the superintendent and the CDE consultant participate in the Collaborative Review group and have a role in designing the review plan and any corrective actions related to noncompliance. These shared responsibilities reduce the elements of surprise and misunderstanding suggested in the OSEP question. Districts and, therefore, superintendents have until June 30 of the current fiscal year to send in their self-reviews and related documents resulting in procedural guarantees plan. Therefore, the CDE does not anticipate reluctance to sign the agreement as the superintendent is involved from the beginning and is an active participant in the agreement development. Should a superintendent for some reason decide not to sign the CDE would impose sanctions.

b. For how long will CDE negotiate with the district to reach a mutually agreeable Quality Assurance Agreement?

Answer: As you recall from the elements of the Quality Assurance Process, the elements of QAP include the local plan, complaints monitoring, CCR and Focused Monitoring. Given this quality assurance focus, the CDE negotiations with districts relevant to Quality Assurance Agreements all relate to the districts on-going compliance responsibilities. Your term “Negotiations” would suggest noncompliance and any agreement would depend on the nature of the noncompliant issue and the scope of the corrective action. The CDE requires that districts immediately correct noncompliant items.

c. After how long will CDE issue a unilateral report if it cannot reach agreement with the district?

Answer: As delineated above, if a report is not provided by an LEA, they are out of compliance on or before June 30 and the enforcement tools with the resultant timelines are applied.

4. How will CDE demonstrate effectiveness of the collaborative review process within a year?

Answer: Any district undergoing a Collaborative Review will correct all identified noncompliant findings. They will be monitored each year for compliance. Above

and beyond this monitoring, the CDE will work with these districts pursuant to the five CDE goals:

1. The unique needs for specially designed instruction will be accurately identified for all students with disabilities.
2. All students with disabilities will be served or taught by fully qualified personnel.
3. All students with disabilities will be successfully integrated with non-disabled peers throughout their educational experience.
4. All students with disabilities will meet high standards for academic and non-academic skills.
5. All students with disabilities will successfully participate in preparation for the workplace and living independently.

G. *Timelines for Verification Reviews. The timetable on page 11 of CDE's Quality Assurance Notebook includes timelines for the first few steps of the verification review process, but does not include timelines beyond completion of the "desk audit."*

1. *What are the timelines for the other steps in the verification review process?*

Answer: For each and every area of noncompliance identified, the CDE directs the LEA to rectify the noncompliance. A verification process occurs throughout the school year and during the CCR process. The verification process is used to ensure that the data provided by an LEA to the state is accurate and consistent with CASEMIS definitions. Verification, also assesses compliance status through an audit of a random sample of individual student records. Verification is a critical part of the Focused Monitoring process because the accuracy of data is an essential underpinning of any data-informed process. Verification is also the means by which the CDE provides appropriate supervision and monitors LEAs under Part B of IDEA. Through verification, the CDE supervises a team auditing individual student records for compliance, as well as, to validate the accuracy of CASEMIS data. Because of the importance of appropriate supervision and monitoring, verification is a component of ALL reviews. That is, Facilitated, Collaborative and Preferred Practices will all include a verification process.

As discussed in earlier responses, CDE's four major elements of the quality assurance process include local plan, complaints monitoring, CCR, and Focused Monitoring. Within each of these four elements, CDE conducts compliance and data verification. The other three elements of the Quality Assurance Process may utilize the verification of data depending on the scope and extent of findings of noncompliance and specific corrective actions. These must be initiated as follows:

- Based on complaints and compliance trends, as noted above, the Complaints Management and Mediation Unit (CMM) staff, FMTA Consultants, and

CDE legal staff continuously review complaint and compliance trends. When a district has a large number of complaints and noncompliance findings, CDE staff initiate a review of pattern complaints and local complaint management systems with the district superintendent. Technical assistance is planned and provided by CDE, via the district superintendent, to develop and implement corrections to the district's systemic areas of noncompliance.

- Based on the number and complexity of noncompliant self-review findings, the resolution of CCR self-review findings may suggest, when coupled with the district's compliance history, that there is a need to conduct a wider discussion and review of the district's practices and compliance. This must result in an onsite review for the purposes of developing a more comprehensive understanding of noncompliance and development of more effective corrective action plans. Any and all of these activities must result in an extension of a district's timelines or for that matter must expedite the review process requiring fewer days.

H. What documentation will CDE submit to demonstrate that its new monitoring system, including the self-assessment process, is effective in identifying noncompliance?

Answer: This is not a new monitoring system. The CDE has added a new element, Focus Monitoring, to our overall supervision and monitoring system. In addition to Focused Monitoring, CDE will continue to monitor for LEA compliance through the three other elements of the QAP: local plan, complaints monitoring and CCR.

I. The description on page six of CDE's Quality Assurance Manual regarding selection of districts to be reviewed during the 1999-2000 school year appears to be incomplete.

1. Are there other additional pages to this discussion?

Answer: Additional pages will be added to the manual as the draft is up-dated.

J. We understand from CDE's materials that the selection of districts to be monitored, and how they will be monitored is based primarily upon KPI data.

1. Can CDE, based solely on evidence of current or past noncompliance, select a district for a facilitated or collaborative review, even if the "counting" of all KPIs do not place the district in the pool for one of those reviews? If so, how?

Answer: No. "Compliance" will be added as a new KPI in year 2000-2001. Due process and other district information are brought in during the verification

process. The number of noncompliant items was not a “KPI” in the 1999-2000 transition year.

Year One of Focused Monitoring

All Collaborative and Facilitated districts were volunteers for Focused Monitoring during the 1999-2000 school year. The CDE did not select districts in the transition year based on noncompliance. They were selected based on low KPI performance and the districts’ willingness to volunteer to be a participant in Focused Monitoring.

History of noncompliance is key to the deliberation of the superintendent’s leadership team in understanding and formulating an effective Quality Assurance Process.

K. We have reviewed the KPI counting examples in CDE’s Quality Assurance Manual, but it is not clear to us how those data will be used to make selections and the impact of data regarding past noncompliance in those selection decisions.

1. How will CDE determine which district practices are compliant?

Answer: Focused monitoring is just one of the CDE’s four monitoring and supervision strategies: local plan, complaints monitoring, CCR and Focused Monitoring. For the transition year, volunteer districts were selected based on the ten KPIs. Noncompliant findings, due process and other district information are brought in during the verification process. The number of noncompliant issues was not a KPI for selection during the transition year. The state’s overall monitoring and supervision system includes: local plan, complaints monitoring, CCR and focused monitoring.

2. Will CDE base this determination solely on the district’s self-assessment?

Answer: The CDE will not ascertain compliance or non-compliance based solely on the district’s self-assessment.

3. If not, will CDE review files and conduct interviews to verify the accuracy of the self-assessment regarding all Part B requirements?

Answer: As part of the verification process, CDE will review files and verify the accuracy of data submitted to CDE and compliance with IDEA. If the verification process signals inaccuracy and non-compliance, CDE will probe further into district policies, procedures, and implementation of special education programs. These can include school site visits, interviews, record review of provision of services, etc.

4. If CDE will not collect data to verify the accuracy of the self-assessment regarding all Part B requirements, how will CDE select the Part B requirements regarding which it will conduct interviews and review files?

Answer: The CDE does collect data to verify the accuracy of the self-assessment regarding all Part B requirements. As a State Education Agency (SEA), we understand and fully comply with state-level compliance requirements as delineated in state and federal law. Focused Monitoring is one element of our overall supervision and monitoring effort for the 1,066 LEAs in California.

As we have previously answered, the California Department of Education requires LEAs to submit a wide variety of information on an annual basis. This information addresses their policies and procedures, their budget and services, an assessment of their compliance with federal and state laws (250 districts each year) and information about the students, programs, and outcomes. The following include the primary sources of information that are used as a part of all Quality Assurance processes.

California Special Education Management Information System (CASEMIS)

The California Special Education Management Information System (CASEMIS) is an information reporting and retrieval system, designed for electronic submission of individual student level data twice each year by local agencies to the state, as authorized by state and federal laws. The purposes of this system are to:

- a) free and appropriate public education**
- b) full educational opportunity**
- c) child find and referral**
- d) individualized education programs**
- e) least restrictive environment**
- f) procedural safeguards**
- g) assessments**
- h) confidentiality**
- i) monitor special education programs for compliance;**
- j) provide data to guide planning, policy making, and administration;**
- k) conduct research on programs;**
- l) evaluate programs;**
- m) meet statutory data requirements;**
- n) project future needs;**
- o) share data with other state and local agencies; and**
- p) develop data standards.**

Five categories of information are collected:

- 1. report identification;**
- 2. local education agency identification;**
- 3. student demographics;**
- 4. student program information; and**
- 5. exit data.**

California Basic Educational Data system (CBEDS)

The California Basic Educational Data system (CBEDS) is a statewide database which has as its data sources county offices of education and school districts. CBEDS gathers information on staff and student characteristics as well as enrollment and hiring practices. Three separate forms are used to collect these data: the County/District Information Form, which gathers data on staff and enrollment; the School Information Form, which collects staff and enrollment data specific to schools; and the Professional Assignment Information Form, which collects data on certificated staff from county offices of education and local school districts.

California's Standardized Testing and Reporting (STAR) Program SAT 9 (STAR)
California's Standardized Testing and Reporting (STAR) Program was enacted by Senate Bill 376 (Chapter 828, Statutes of 1997). The State Board of Education selected the multiple-choice portion of the Stanford Achievement Test, Ninth Edition, Form T (Stanford 9) as the test to be administered each spring to all students in grades 2 through 11. California Education Code requires that all students shall be tested. A student background information survey administered as a part of the assessment identifies examinees receiving special education services.

Coordinated Compliance Review Self-Review Instrument (CCR)

The CDE conducts CCR reviews on 250 LEAs annually, as part of the 100% cycle. The self-review instrument, including the compliance self-review, must be completed and sent to the CDE by June 30 of the year preceding their scheduled review. The Quality Assurance Process (QAP) is designed, along with other California Department of Education mechanisms, to enforce the protections guaranteed under state and federal law for students and their families. The 250 local agencies involved in the Coordinated Compliance Review, ensure, through the self-review document, that they are in compliance for all program they provide including local K-12, preschool, and birth to age three year programs.

The results of the self-review are sent to CDE's Special Education Division and are examined by a Focused Monitoring consultant for noncompliant items. Local agencies are required to develop a corrective action for each noncompliant item, under the supervision of CDE staff. The consultant monitors the agency in correcting noncompliance in a complete and timely manner. Each corrective action...including response and timeline...is monitored through the same Corrective Action database used for complaints management. As with individual complaints, sanctions are applied for not completing compliance corrective actions.

Complaint Management

When a formal written complaint has been filed with CDE's Special Education Division, the division provides written notice to the school district, SELPA and complainant of the pending complaint (typically within 48 hours). Federal law requires the state to complete an investigation and issue a report with decisions of compliance within 60 days. During the first two weeks, LEAs are encouraged to investigate allegations locally and if necessary, carry out corrective actions. If the complainant signs agreement with the results of the local investigation, the state

considers the allegations of noncompliance to be resolved and the case is closed. CDE requires that LEAs submission of findings, decisions of compliance and corrective actions (as appropriate) with evidence of resolution. If the complainant does not sign off, the state investigation continues until the state investigation consultant has validated and or supplemented local efforts to determine and correct noncompliance. If the school district does not complete a local investigation process, the state investigation consultant implements the standard investigation process and issues a written report within the 60-day timeline. Within 35 days of receipt of the final report, either party may request that the State Superintendent of Public Instruction reconsider the final report. The Superintendent may, within 15 days of receipt of the request, respond in writing to the parties and modify the conclusions or required corrective actions of the CDE report. Pending the Superintendent's discretionary reconsideration, the Department report remains in effect and enforceable.

L. We have reviewed the KPI counting examples in CDE's Quality Assurance Manual, but it is not clear to us how those data will be used to make selections and the impact of data regarding past noncompliance in those selection decisions.

- 1. Using specific examples, can you please demonstrate how CDE will use KPI data to select districts for monitoring?*

Answer: As described to you in the elements of the Quality Assurance Process, in each and every incident of noncompliance, the CDE imposes a Corrective Action Plan and enforcement tools are applied, as appropriate. The following steps listed under "Selection Activities/Process" demonstrate how CDE uses KPI data to select Focused Monitoring districts only. Again, the Focused Monitoring districts are a small but important part of the total Quality Assurance Process.

Selection Activities/Process

The items listed below describe how the Special Education Division staff selected the districts invited to participate in Facilitated or Collaborative Focused Monitoring in the transition year, 1999-2000.

- 1. Arranged the districts in 7 groups based on General Education (GE) enrollment plus one group per county and state operated programs.**
- 2. Constructed 14 measures across 10 KPIs; 2 KPIs have multiple measures.**
- 3. For each measure, calculate a score for each district within GE enrollment groups 1 through 5.**
- 4. Counted the number of times each district fell within the low 15% of its GE enrollment group across all KPIs. These counts can range from 0 through 10.**
- 5. Counted the number of times each district fell within the low 15% of its GE enrollment group across all KPIs for Goal IV. These counts can range from 0 through 6.**

6. Counted the number of times each district fell within the low 15% of its GE enrollment group across measures for Goal I. These counts can range from 0 through 4.
7. Counted the number of times each district fell within the low 15% of its GE enrollment group across measures for Goal II. These counts can range from 0 through 2.
8. For each count, listed districts in reverse rank order within GE enrollment groups. The ordering was determined using a step-by-step process that looked first at overall KPI count, then at counts on Goal IV, Goal I and Goal II in sequence.
9. For the regional superintendents meeting, the KPI count listings were stratified by region so that the 5 districts highest on the listing within each of the Northern and Southern regions and 6 districts from the Central Region were included in a Facilitated review pool.
10. Using the same process and listings, 8 districts each from the Northern, Central and Southern regions were included in a collaborative review pool.

M. CDE proposes to conduct eight facilitated, 12 collaborative, 18 verification, and 9 preferred practices reviews during the 1999-2000 school year.

1. *How will CDE use these 47 reviews, together with any other methods, to ensure that districts throughout the State are in compliance with the requirements addressed by the findings in OSEP's 1999 California monitoring report, regarding the provision of a free appropriate public education, placement in the least restrictive environment, the provision of needed transition services, and timely reevaluation?*

Answer: CDE uses all the four elements of the QAP, including the Focused Monitoring reviews to ensure that districts throughout the state are in compliance, including OSEP identified areas.

II. CDE's SPECIFICATION OF REQUIRED CORRECTIVE ACTIONS

Over-Arching Question:

How will CDE ensure that it requires corrective actions that are sufficient to correct identified noncompliance effectively?

- A. *Will the Quality Assurance Agreement, including the Procedural Guarantees Plan, for each district that receives a facilitated, collaborative, or verification review, include procedures to ensure district-wide compliance? Please describe any exceptions.*

Answer: Yes, the Quality Assurance Agreement, including the Procedural Guarantees Plan, and/or a corrective action plan for each district that receives a

Facilitated, Collaborative, or Verification review, will include procedures to ensure district-wide compliance. There are no exceptions.

B. In the September 21, 1999 meeting, Dr. Parker informed us that CDE will monitor Los Angeles Unified School District as 27 separate clusters, and that each monitoring review will be limited to an individual cluster (e.g., CDE will conduct a collaborative review of the Hamilton/Palisades Cluster of Los Angeles during the 1999-2000 school year).

1. If as part of the collaborative review, CDE finds noncompliance in the Hamilton/Palisades Cluster, will CDE require Los Angeles USD to take district-wide corrective action?

Answer: Yes, if district-wide noncompliance is identified within any of the four elements of the quality assurance program, it will be corrected on a district-wide basis.

2. How will CDE determine whether any noncompliance that it finds in the Hamilton/Palisades Cluster reflects district-wide noncompliance or is limited to that cluster?

Answer: As part of the collaborative review, a verification process is applied with an adequate, reliable sampling. Two assumptions are made: first; the CDE assumes that any noncompliance found in the Hamilton/Palisades cluster is representative of the district as a whole, and second; corrective actions applied ensure a plan to correct noncompliance district-wide. This cycle may occur each year as new clusters are reviewed in any of the four elements of the quality assurance process.

3. Are there any other districts for which CDE will monitor single clusters rather than the district as a whole? If so, which districts?

Answer: No, LAUSD is unique in its size with over 700,000 pupils.

4. How did CDE select the Hamilton/Palisades Cluster as the one cluster in Los Angeles USD that the CDE will monitor during the 1999-2000 school year?

Answer: KPI data were used to select the Hamilton/Palisades Cluster.

5. Given that the Hamilton/Palisades Cluster is the only cluster that CDE will monitor during the 1999-2000 school year, how will CDE ensure district-wide correction of district-wide noncompliance that CDE and OSEP have identified?

Answer: As part of the collaborative process, all noncompliant areas are delineated in a Procedural Guarantees Plan with corrective actions and timelines and those

noncompliant areas are considered to be district-wide. The collaborative team comprised of both district and CDE staff, monitor to ensure resolution of all corrective actions. The CDE continues to ensure and supervise a full implementation of the Procedural Guarantees Plan district-wide.

- C. If CDE finds patterns of noncompliance across districts within SELPAs, in regions of the State, or across the State, what action(s) will CDE take to determine whether corrective action that goes beyond individual districts is necessary?*

Answer: In every instance where CDE identifies noncompliance, a corrective action will be required. In California, the CDE holds the district of pupil residence accountable. The county superintendent must assure that all children in a county receive FAPE. Through local plan, complaints monitoring, CCR and Focused Monitoring, the CDE has, and will continue to address single district and SELPA-wide or countywide noncompliance.

III. EFFECTIVE CORRECTION OF IDENTIFIED NONCOMPLIANCE

Over-Arching Question:

How will CDE ensure, within one year, that public agencies correct noncompliance identified by: (1) CDE's focused monitoring system; (2) CDE's previous monitoring procedures; (3) CDE's systems for complaint resolution and impartial due process hearings; and (4) OSEP's California monitoring report?

- A. CDE's Quality Assurance Process Manual states on page 27 that, "It is expected that the District will implement the plans and actions included in the Quality Assurance Agreement." The manual does not, however, specify the procedures that CDE will utilize to ensure the effective implementation of each district's agreement. Dr. Parker's 9/17/99 memorandum states that the specific procedures and timeliness that CDE will implement to ensure timely correction are provided in the "Corrective Actions Procedures" binder (I.A.2(f)). We have reviewed that binder; while it includes blank forms for documenting each Focused Monitoring and Technical Assistance (FMTA) team's actions, we need additional information to understand the procedures that require districts to take timely and effective corrective action.*

For each of the three types of review:

- 1. What criteria will CDE use to determine whether, as part of the Procedural Guarantees Plan or any other corrective action requirement, the district will be required to demonstrate that: (a) it has revised its written policies, procedures, and/or forms; (b) it has provided training to its staff; and/or (c) practices throughout the district are now consistent with the requirements of Part B (e.g., students receive a free appropriate*

public education, including all related services set forth in their IEPs; public agencies make placement decisions in a manner consistent with the least restrictive environment requirements; students receive needed transition services; and students receive timely reevaluations)?

Answer: The CDE criteria to determine corrective action requirements are based upon IDEA, state laws and regulations found in the Quality Assurance Process, Compliance Document 2000-2001. This document (attached) includes all OSEP identified noncompliance.

If policy revisions, training or practices are needed for those districts selected for review, it is documented and the CDE staff participate in the revision of the district policies, assist the team in identifying training needs and assist the team in securing technical assistance. Follow-up is done by state staff. Corrective actions require technical assistance in a district's policies, procedures, forms or for staff training. Technical assistance is needed to assist with changes in practice required in Part B.

2. *What data will CDE collect and how will it collect those data to determine whether the district has effectively implemented the required corrective actions and brought its policies, procedures, and practices into compliance?*

Answer: The data collected and how CDE will collect it include but are not limited to the following:

1. CALIFORNIA SPECIAL EDUCATION MANAGEMENT INFORMATION SYSTEM (CASEMIS)

The California Special Education Management Information System (CASEMIS) is an information reporting and retrieval system, designed for electronic submission of student level data by local agencies to the state, as authorized by California and federal laws. The purpose of this system is to:

- a) monitor special education programs for compliance;
- b) provide data to guide planning, policy making, and administration;
- c) conduct research on programs;
- d) evaluate programs;
- e) meet statutory data requirements;
- f) project future needs;
- g) share data with other state and local agencies; and
- h) develop data standards.

Five categories of information are collected:

1. report identification;
2. local education agency identification;

3. student demographics;
4. program information; and
5. exit data.

This information is collected annually from all districts through the SELPA to the state.

2. CALIFORNIA BASIC EDUCATIONAL DATA SYSTEM (CBEDS)

The California Basic Educational Data system (CBEDS) is a statewide database which has as its data sources county offices of education and school districts. CBEDS gathers information on staff and student characteristics as well as enrollment and hiring practices. Three separate forms are used to collect these data: the County/District Information Form, which gathers data on staff and enrollment; the School Information Form, which collects staff and enrollment data specific to schools; and the Professional Assignment Information Form, which collects data on certificated staff from county offices of education and local school districts. This is an annual collection system.

3. COMPLAINTS

Whenever a formal complaint has been filed with CDE's Special Education Division, the division informs the school district and SELPA of the pending complaint (usually within 48 hours). Federal law requires the state to complete an investigation and issue a report within 60 days. During the first two weeks, LEAs are encouraged to investigate allegations locally, and if necessary, carry out corrective actions. If the complainant signs his/her agreement with the results of the local investigation, the state considers the allegations of noncompliance to be resolved and the case is closed. If the complainant does not sign off, the state investigation continues until the state investigation consultant has validated and or supplemented local efforts to determine and correct noncompliance. If the school district does not engage the local investigation process, the state investigation consultant implements the standard investigation process and issues a written report within the 60-day timeline. Within 35 days of receipt of the final report, either party must request that the State Superintendent of Public Instruction reconsider the final report. The Superintendent must, within fifteen (15 days) of receipt of the request, respond in writing to the parties and modify the conclusions or required corrective actions of the CDE report. Pending the Superintendent's reconsideration or the federal appeal process, the Department report remains in effect and enforceable.

4. CALIFORNIA'S STANDARDIZED TESTING AND REPORTING (STAR) SAT 9

California's Standardized Testing and Reporting (STAR) Program was enacted by Senate Bill 376 (Chapter 828, Statutes of 1997). The State Board of Education selected the multiple-choice portion of the Stanford Achievement Test, Ninth Edition, Form T (Stanford 9) as the test to be administered each spring to all students in grades 2 through 11. California Education Code requires that all students shall be tested, including students in special education programs and students subject to Section 504 plans under federal law. A student background information survey administered as a part of the assessment identifies examinees receiving special education services.

5. KEY PERFORMANCE INDICATORS (KPIs)

The focused monitoring component of the Quality Assurance Process uses key performance indicators (KPIs) that are aligned with the Special Education Division Goals. A stakeholder group, composed of field professionals and advocates who have experience and knowledge of special education, provided input and clarified issues in the development of QAP and the KPIs. The KPIs are used to monitor the practices in an educational agency that relate to effective learning for students and the enforcement of the protections guaranteed under law to them and their families. Those KPIs that are valid and reliable measures of goal attainment are used to select school districts for monitoring.

3. *Will CDE make onsite follow-up visits to determine whether the district has fully corrected the noncompliance?*

Answer: Onsite follow-up visits to determine whether the district has fully corrected the noncompliance will occur, as needed.

4. *How will CDE decide if a data collection visit is needed to determine whether a public agency has corrected noncompliance?*

Answer: If the corrective action evidence cannot be ascertained through routine procedures one or more visits will be carried out. Evidence includes each area of noncompliance, corrective actions required, timelines for resolution, CDE approval, and closure or sanctions if needed.

- B. *For noncompliance that CDE identifies on, or after, July 1, 1999, through any monitoring activities other than the Focused Monitoring review, please provide the information requested under the subparts a, b and c of Question 1, above.*

Answer: For noncompliance that the CDE identified on, or after, July 1, 1999, through any monitoring activities including Focused Monitoring review, the CDE will use the four elements of the quality assurance process (Local Plan, Coordinated Compliance Review, Complaint Management, and Focused Monitoring). All of these four elements are utilized when ascertaining the status of LEA compliance. The CDE criteria to determine corrective action requirements are based upon

revised IDEA and state laws and regulations found in the Quality Assurance Process, Compliance Document 2000-2001. This document (attached) includes all OSEP identified noncompliance.

If policy revisions, training or practices are needed for those districts selected for reviews, CDE staff participates in the revision of those district policies, assists the team in identifying training needs and assists the team in securing technical assistance which may be necessary.

C. For any noncompliance that CDE identified prior to July 1, 1999, and that has not yet been corrected, please provide the information requested under the subparts a, b, and c of Question 1, above.

Answer: As in Focused Monitoring we wish to reiterate that the four elements of the quality assurance process (Local Plan, Coordinated Compliance Review, Complaint Management, and Focused Monitoring) are all brought to bear when ascertaining the status of LEA compliance. The CDE criteria to determine corrective action requirements are based upon revised IDEA and state laws and regulations found in the Quality Assurance Process, Compliance Document 2000-2001. This document (attached) includes all OSEP identified noncompliance.

If policy revisions, training or practices are needed for those districts selected for reviews, CDE staff participates in the revision of those district policies, assists the team in identifying training needs and assists the team in securing technical assistance which must be necessary.

D. What enforcement action(s), if any, has CDE taken since OSEP's June 1998 visit? (Please describe the basic date(s), and status of each action.)

Answer: The following chart displays the actions taken since June 1998:

ACTION	BASIS	DATE(S)	STATUS
1. Sanction Legislation	CDE/CDE Need	1999-2000	Local Boards hold public hearings re: complaint noncompliance
2. Revise & Implement Procedures for Compliance Enforcement	CDE/CDE NEED	Targeted for 2/2000 implementation	In Administrative and Legal Review
3. Individual CDE/CDE Monitors for LEA	Enforce & Monitor Systemic Noncompliance	Began 1997	ongoing
4. Conduct Administrative	Enforce &	Began 1999	ongoing

On-site reviews	Monitor Systemic Noncompliance		
5. Administer Sanction Stage letters	Enforce compliance	Began 1998	ongoing
6. Revised monitoring Complaint Corrective Action System in focused Monitoring, Technical Assistance Units	Enforce compliance	July 1, 1999	ongoing
7. CDE legal review of complaint cases	Assist in compliance enforcement	Began 1999	ongoing

Some examples of actions taken since July 1, 1999 include Complaints Management and Mediation (CMM) complaint investigations in which allegations of Part B noncompliance were supported and corrective actions issued by the CDE. Please see the attached charts displaying formal statewide complaint investigations and their current status.

In addition, CDE teams conduct on-site visitations for some districts. These districts are chosen based on complaints and compliance trends as noted above, the Complaints Management and Mediation Unit, Focused Monitoring Regional Consultant, and CDE legal staff continuously review complaint and compliance trends. When a district has a large number of complaints and noncompliance findings, CDE staff initiates a review of complaints and local complaint management systems with the district superintendent. Technical assistance is planned and provided by CDE, via the district superintendent, to develop and implement corrections to the district's systemic areas of noncompliance.

E. CDE informed OSERS during the 9/21/99 meeting that it would, within the next week or so, send three districts notice that – unless they corrected previously identified noncompliance within 60 days – CDE would take enforcement action.

- 1. Has CDE sent these letters? (Please provide OSEP, as soon as possible, with a copy of these letters, and any subsequent correspondence, regarding noncompliance in these districts.)*

Answer: In lieu of these letters, CDE staff met with the superintendents and their respective staff. The agenda of these meetings included the issues of noncompliance, complaint histories and sanction requirements for failure to implement their district corrective action plans. The districts are, with superintendent leadership and oversight, correcting areas of noncompliance.

2. *How were these three districts selected from among all of the districts with long-standing serious noncompliance?*

Answer: While all districts with unimplemented corrective action plans are subject to sanctions, the selected districts have exhibited a trend toward an increase in noncompliance, as well as, general inaction toward correcting areas of noncompliance.

3. *How and when will CDE take action regarding the other districts with long-standing serious noncompliance?*

Answer: The CDE is required to have sanctions for LEA noncompliance which can reasonably be expected to compel compliance where necessary. As you are aware, there are no objective standards as to specific sanctions that are required. If OSEP believes our sanctions are not appropriate, or that other sanctions are required, it is important for OSEP to communicate that to us directly. The CDE is addressing all districts with outstanding noncompliance by consultant contact and or written notice of pending or actual sanction(s). All prior 1999 noncompliance issues, are being addressed by being brought forward and included in one of the four elements of the quality assurance process. No district is held harmless for past noncompliance issues.

- F. *Dr. Parker's 9/17/99 memorandum describes sanctions for which CDE currently has authority and others for which CDE is seeking authority. The only sanction that the memorandum describes as currently available is the provision, under AB 1115, that school boards can be required to hold public hearings for instances of noncompliance with state and federal special education law.*

1. *How will CDE ensure compliance through this requirement?*

Answer: Copies of Board agendas and minutes verify the holding of required public hearings.

2. *Given the sole option that CDE describes as currently available:*

- a. *What is CDE's basis for stating on page 5 of Dr. Parker's 9/17/99 memo that "the sanctions in place do currently place (CDE) in compliance"?*

Answer: As you are aware, there are no objective standards as to specific sanctions that are required. If OSEP believes our sanctions are not appropriate, or that other sanctions are required, it is important for OSEP to communicate that to us directly.

However, CDE sanctions currently available include:

- **Withholding of federal Part B dollars**
- **Non approval of local plans which would cause federal and state dollars to stop flowing**
- **Requiring local boards of education to hold public hearings to address serious noncompliance and how the district will come into compliance with state and federal law**
- **Requesting a writ of mandate within a state court to order compliance with a corrective action plan. (Should the LEA not comply, contempt proceeding would be instituted.)**

b. How will CDE demonstrate, within a year, that it has implemented appropriate enforcement actions and ensured that public agencies have corrected identified noncompliance, including noncompliance identified in prior CDE and OSEP monitoring reports and complaint decisions?

Answer: As you are aware, there are no objective standards as to specific sanctions that are required. If OSEP believes our sanctions are not appropriate, or that other sanctions are required, it is important for OSEP to communicate that to us directly.

However, the CDE will apply the following sanctions as required:

- **Withholding of federal Part B dollars**
- **Non approval of local plans which would cause federal and state dollars to stop flowing**
- **Requiring local boards of education to hold public hearings to address serious noncompliance and how the district will come into compliance with state and federal law.**
- **Requesting a writ of mandate within a state court to order compliance with a corrective action plan. (Should the LEA not comply, contempt proceeding would be instituted.)**

3. In addition to the sanction option that Dr. Parker's 9/17/99 memorandum describes as currently available (the provision, under AB 1115, that school boards can be required to hold public hearings for instances of noncompliance with state and federal special education law) and the option of withholding State or Federal funds (that Dr. Parker's 9/17/99 memorandum states CDE will implement by June 30, 1999), what additional sanction options and authority does CDE need in order to ensure that public agencies promptly and effectively correct noncompliance with Part B requirements?

Answer: As you are aware, there are no objective standards as to specific sanctions that are required. If OSEP believes our sanctions are not appropriate, or that other sanctions are required, it is important for OSEP to communicate that to us directly.

However, The CDE will apply the following sanctions as required:

- **Withholding of federal Part B dollars**
- **Non approval of local plans which would cause federal and state dollars to stop flowing**
- **Requiring local boards of education to hold public hearings to address serious noncompliance and how the district will come into compliance with state and federal law.**
- **Requesting a writ of mandate within a state court to order compliance with a corrective action plan. (Should the LEA not comply, contempt proceeding would be instituted.)**

4. How and when will CDE obtain each such addition to its sanction options and authority?

Answer: As you are aware, there are no objective standards as to specific sanctions that are required. If OSEP believes our sanctions are not appropriate, or that other sanctions are required, it is important for OSEP to communicate that to us directly.

While the Legislature is an independent body and functions on its own, the CDE is in the process of seeking legislation to put in place sanctions and related activities to ensure effective sanctions when necessary.

G. CDE and OSEP have identified long-standing serious noncompliance in a number of school districts.

1. What enforcement and other actions will CDE take with each of these districts this year to ensure that they fully correct all identified noncompliance?

Answer: As a State Education Agency (SEA) we recognize our responsibility to establish and maintain a system of statewide LEA compliance. Both federal and state law require us to both monitor the activities of our LEA's in providing eligible children with Free Appropriate Public Education (FAPE), and also to take appropriate actions when LEA's are failing to carry out their responsibilities. If necessary CDE will impose sanctions. As you are aware, there are no objective standards as to specific sanctions that are required. If OSEP believes our sanctions are not appropriate, or that other sanctions are required, it is important for OSEP to communicate that to us directly.

2. What are the timelines for taking each of those actions?

Answer: As a State Education Agency (SEA), we recognize our responsibility to establish and maintain a system of statewide LEA compliance. Both federal and state law require us to both monitor the activities of our LEA's in providing eligible children with Free Appropriate Public Education (FAPE), and also to take

appropriate actions when LEA's are failing to carry out their responsibilities. CDE compliance enforcement is an ongoing process. Individual district timelines for systemic correction of noncompliance are monitored by CDE until the district comes into compliance according to the corrective action plan.

3. *CDE informed us during the 9/21/99 meeting that the materials that CDE was providing to us included a draft of a detailed corrective action plan for San Francisco. That document was not, however, referenced in the list of exhibits and we did not find it in the box of materials. Please forward a copy of the draft to us as soon as possible, and of the final approved document as soon as it becomes available.*

Answer: These documents were sent on 12/6/99.

IV. ADDITIONAL QUESTIONS

- A. *CDE's Quality Assurance Manual addresses data regarding performance of students with disabilities taking STAR. It appears that data regarding students with disabilities who do not take the STAR are not included (see IV.b and IV.f).*

1. *Will data regarding the performance of students with disabilities who use alternate assessments, rather than the STAR, be included in the KPI data that will be the basis for selecting districts for monitoring reviews?*

Answer: Yes, after July 1, 2000 the performance of students with disabilities who use alternate assessments, rather than the STAR, will be included in the KPI data.

- B. *Under CDE's focused monitoring system, is it possible for a district to never receive any type of focused monitoring review? If so, how will CDE ensure compliance in such a district?*

Answer: No. CDE's four elements of the Quality Assurance Process (QAP) ensure that all districts in California are monitored on an annual basis.

- C. *Page 2 is missing from the Power Point presentation pages after the tab labeled "II. Data" in the Quality Assurance Manual. Will you please provide us with a copy of that page?*

Answer: As many iterations of the Power Point presentation have been develop, if you will provide CDE with the specific date of the Power Point presentation you have, we will be pleased to provide you with the specific page.

ATTACHMENTS

NOTE: To receive a hard copy of any of these Attachments, please provide your name, mailing address and telephone number (in the event clarification is needed) in an E-mail to msulliva@cde.ca.gov . Do not request a faxed copy, these Attachments are too large.

- 1. California Department of Education, Special Education Division, “Estimated Number of Students Receiving Special Education Services in Districts Monitored during 1999-2000 by Type of Monitoring”**
- 2. California Department of Education, Special Education Division, “Quality Assurance Process: Compliance Document 2000-2001**
- 3. California Department of Education, Special Education Division, “Corrective Actions – North, Central, South”**
- 4. California Department of Education, Special Education Division, SELPA Local Plan Cycle C Total Revise**